2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008
Secretary of State

DOCUMENT# N03000007676

Entity Name: EXPECTANT FAITH MINISTRIES, INC.

Current Principal Place of Business:

297 CURRENT DRIVE
ROCKLEDGE, FL 32955

New Principal Place of Business:

3200 NE 25TH AVE.
OCALA, FL 34479

Current Mailing Address:

297 CURRENT DRIVE
ROCKLEDGE, FL 32955

New Mailing Address:

3200 NE 25TH AVE.
OCALA, FL 34479

FEI Number: 43-2027982 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CLARK, FOSTER A
297 CURRENT DRIVE
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

CLARK, FOSTER A
10085 SE 106TH ST
BELLEVIEW, FL 32940 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____ 05/01/2008
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CLARK, FOSTER A
Address: 297 CURRENT DRIVE
City-St-Zip: ROCKLEDGE, FL 32955

Title: VS ( ) Delete
Name: WILLIAMS, JOYCE
Address: 12670 N.E. 30TH CT.
City-St-Zip: ANTHONY, FL 32617

Title: D ( ) Delete
Name: SPAINHOUR, CINDI
Address: 131 OAKLEDGE DR.
City-St-Zip: ROCKLEDGE, FL 32955

Title: BA (X) Delete
Name: HUMPHREY, DONALD
Address: 2707 S. COURTENAY PKWY
City-St-Zip: MERRITT ISLAND, FL 32952

Title: BA (X) Delete
Name: HUMPHREY, CAROL D
Address: 2707 S. COURTENAY PKWY
City-St-Zip: MERRITT ISLAND, FL 32952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CLARK, FOSTER A
Address: 10085 SE 106TH ST
City-St-Zip: BELLEVIEW, FL 32940

Title: VS (X) Change ( ) Addition
Name: BERRY, JIM
Address: 8434 NW 2ND ST
City-St-Zip: OCALA, FL 34479

Title: D (X) Change ( ) Addition
Name: WILLIAMS, JOYCE
Address: 12670 N.E. 30TH CT.
City-St-Zip: ANTHONY, FL 32617

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FOSTER A. CLARK P 05/01/2008
Electronic Signature of Signing Officer or Director — Date