

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008871

FILED
Feb 09, 2009
Secretary of State

Entity Name: TRUTH AND SPIRIT MINISTRY, INC.

Current Principal Place of Business:

1456 WEST 5TH STREET
JACKSONVILLE, FL 32209

New Principal Place of Business:

Current Mailing Address:

1456 WEST 5TH STREET
JACKSONVILLE, FL 32209

New Mailing Address:

FEI Number: 65-1199832

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MOORE, CASSANDRA
6610 FELIX DR W
JACKSONVILLE, FL 32219 US

Name and Address of New Registered Agent:

MOORE, CASSANDRA J DIRECTO
6610 FELIX DR W
JACKSONVILLE, FL 32219 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: CASSANDRA J MOORE

02/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOORE, LYNWOOD A SR
Address: 6610 FELIX DR W
City-St-Zip: JACKSONVILLE, FL 32219

Title: D () Delete
Name: MOORE, CASSANDRA J
Address: 6610 FELIX DR W
City-St-Zip: JACKSONVILLE, FL 32219

Title: S () Delete
Name: JACKSON-TOOMBS, CYNTHIA V
Address: 3437 NATALIE DR S
City-St-Zip: JACKSONVILLE, FL 32218

Title: T () Delete
Name: HODGE, LESLIE A
Address: 8539 GATE PARKWAY W UNIT 435
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: CASSANDRA J MOORE

D

02/09/2009

Electronic Signature of Signing Officer or Director

Date