

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010359

FILED
Jul 11, 2008
Secretary of State

Entity Name: A. FERGUSON MINISTRIES, INC.

Current Principal Place of Business:

3110 NW 211TH ST
MIAMI, FL 33056

New Principal Place of Business:

Current Mailing Address:

3110 NW 211TH ST
MIAMI, FL 33056

New Mailing Address:

FEI Number: 42-1611846 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

FERGUSON, ARLINGTON JR
3110 NW 211TH ST
MIAMI, FL 33056 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FERGUSON, ARLINGTON JR
Address: 3110 NW 211TH ST
City-St-Zip: MIAMI, FL 33056

Title: V () Delete
Name: FERGUSON, GERRONIA
Address: 3110 NW 211TH ST
City-St-Zip: MIAMI, FL 33056

Title: D () Delete
Name: FIGGS, GESHAUNA
Address: 3110 NW 211TH ST
City-St-Zip: MIAMI, FL 33056

Title: D () Delete
Name: JONES, WILLIE J
Address: 2261 NW 58TH ST
City-St-Zip: MIAMI, FL 33142

Title: D () Delete
Name: FERGUSON, VICTORIA
Address: 3612 NW 194TH TERR
City-St-Zip: MIAMI, FL 33056

Title: D () Delete
Name: FIGGS, GERRONIA
Address: 2234 NW 58TH ST
City-St-Zip: MIAMI, FL 33142

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:

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: WILLIE JONES

D

07/11/2008

Electronic Signature of Signing Officer or Director

_____ Date