


FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90228 047 ****61.25

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N04000002440					
1. Entity Name POWERPOINT MINISTRIES INC.					
Principal Place of Business 14408 SHEBA ROAD ORLANDO, FL 32832			Mailing Address 14408 SHEBA ROAD ORLANDO, FL 32832		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-0910990	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
HARRIS, GEOFFREY C 14408 SHEBA RD ORLANDO, FL 32832				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	FL Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>(NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS					
TITLE	P	<input type="checkbox"/> Delete			
NAME	HARRIS, GEOFFREY C				
STREET ADDRESS	14408 SHEBA RD				
CITY - ST - ZIP	ORLANDO, FL 32832				
TITLE	VST	<input type="checkbox"/> Delete			
NAME	MISSIMER, WADE				
STREET ADDRESS	6506 FRANCONIA DR				
CITY - ST - ZIP	BELLE ISLE, FL 32812				
TITLE	ST	<input checked="" type="checkbox"/> Delete			
NAME	SHAMEY, NATHAN				
STREET ADDRESS	12803 AUSTIN COVE COURT				
CITY - ST - ZIP	CLERMONT, FL 34711				
TITLE	D	<input type="checkbox"/> Delete			
NAME	NEUMANN, DENNIS				
STREET ADDRESS	6305 GIBSON DR				
CITY - ST - ZIP	ORLANDO, FL 32809				
TITLE		<input type="checkbox"/> Delete			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE		<input type="checkbox"/> Delete			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Geoffrey C. Harris</i></u> GEOFFREY C. HARRIS 4-24-07 407 381-9968					