

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002440

FILED  
Apr 19, 2012  
Secretary of State

**Entity Name:** POWERPOINT MINISTRIES INC.

**Current Principal Place of Business:**

5381 HOFFNER AVENUE  
ORLANDO, FL 32812

**New Principal Place of Business:**

**Current Mailing Address:**

5381 HOFFNER AVENUE  
ORLANDO, FL 32812

**New Mailing Address:**

**FEI Number:** 20-0910990

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HARRIS, GEOFFREY C  
14408 SHEBA ROAD  
ORLANDO, FL 32832 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  
Name: HARRIS, GEOFFREY C  
Address: 14408 SHEBA RD  
City-St-Zip: ORLANDO, FL 32832

Title: D  
Name: JOHN, ANDERSEN  
Address: 4444 SEAWATER STREET  
City-St-Zip: ORLANDO, FL 32812

Title: VP  
Name: NEUMANN, DENNIS  
Address: 6305 GIBSON DR.  
City-St-Zip: ORLANDO, FL 32809

Title: ST  
Name: BARBER, TIM  
Address: 1709 LORENA LANE  
City-St-Zip: ORLANDO, FL 32806

Title: D  
Name: LEONARDI, MICHAEL  
Address: 7713 ALTAVAN AVENUE  
City-St-Zip: ORLANDO, FL 32822

Title: D  
Name: HARRIS, STEVE D  
Address: 37 MARK TWAIN ROAD  
City-St-Zip: ASHEVILLE, NC 28805

I hereby 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 all other like empowered.

**SIGNATURE:** GEOFFREY C. HARRIS

P

04/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date