

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003223

FILED  
Feb 09, 2012  
Secretary of State

**Entity Name:** TALLAHASSEE MINISTRIES, INC.

**Current Principal Place of Business:**

1927 VINELAND LANE  
TALLAHASSEE, FL 32317

**New Principal Place of Business:**

**Current Mailing Address:**

1927 VINELAND LANE  
TALLAHASSEE, FL 32317

**New Mailing Address:**

**FEI Number:** 20-0887538

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STOWERS, ALISON  
1927 VINELAND LN  
TALLAHASSEE, FL 32317 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:** PD  
**Name:** STOWERS, KRIS  
**Address:** 1927 VINELAND LANE  
**City-St-Zip:** TALLAHASSEE, FL 32317

**Title:** SD  
**Name:** WINSHIP, KEVIN M  
**Address:** 1698 VILLAGE SQUARE BLVD.  
**City-St-Zip:** TALLAHASSEE, FL 32309

**Title:** VD  
**Name:** WINSHIP, KEITH  
**Address:** 6656 TIM TAM TRAIL  
**City-St-Zip:** TALLAHASSEE, FL 32309

**Title:** TD  
**Name:** WHITNEY, PAUL R  
**Address:** 1375 CONSERVANCY DR. E.  
**City-St-Zip:** TALLAHASSEE, FL 32312

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:** KRIS STOWERS

PD

02/09/2012

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

\_\_\_\_\_  
Date