

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003921

FILED
Apr 27, 2012
Secretary of State

Entity Name: WHOLE FAITH MINISTRIES, INC.

Current Principal Place of Business:

671 SW LAKEHURST DRIVE
PT ST LUCIE, FL 34983

New Principal Place of Business:

96 N.E. DIXIE HIGHWAY
STUART, FL 34994

Current Mailing Address:

671 SW LAKEHURST DRIVE
PT ST LUCIE, FL 34983

New Mailing Address:

FEI Number: 86-1101613

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THURMOND, GWANDINE C
671 SW LAKEHURST DRIVE
PT ST LUCIE, FL 34983 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: THURMOND, JEFFREY M PASTOR
Address: 671 SW LAKEHURST DRIVE
City-St-Zip: PT ST LUCIE, FL 34983 US

Title: SVP
Name: THURMOND, GWANDINE C CO-PAST
Address: 671 SW LAKEHURST DRIVE
City-St-Zip: PT ST LUCIE, FL 34983 US

Title: VP
Name: THURMOND, DONNELL ELDER
Address: 671 SW LAKEHURST DRIVE
City-St-Zip: PT ST LUCIE, FL 34983 US

Title: VP
Name: THURMOND, MORGAN MIN.
Address: 671 SW LAKEHURST DRIVE
City-St-Zip: PT ST LUCIE, FL 34983 US

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: GWANDINE C. THURMOND

SVP

04/27/2012

Electronic Signature of Signing Officer or Director

Date