

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005676

FILED
May 01, 2008
Secretary of State

Entity Name: WATCHMAN MINISTRY, INC.

Current Principal Place of Business:

809 EAST BLOOMINGDALE AVENUE
SUITE #132
BRANDON, FL 335118113 US

New Principal Place of Business:

Current Mailing Address:

809 EAST BLOOMINGDALE AVENUE
SUITE #132
BRANDON, FL 335118113 US

New Mailing Address:

FEI Number: 20-1216717 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

Name and Address of New Registered Agent:

GARMON, REV. BRUCE E SR.
403 HOLIDAY TERRACE
BRANDON, FL 335115533 US

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: REV () Delete
Name: GARMON, BRUCE E SR.
Address: 403 HOLIDAY TERRACE
City-St-Zip: BRANDON, FL 335115533 US

Title: REV () Delete
Name: JARNEGAN, CHRISTOPHER S SR.
Address: 4811 BRISTON BAY WAY #104
City-St-Zip: TAMPA, FL 33619 US

Title: SEC () Delete
Name: SHIELDS, ROSE M
Address: 2032 BRANDON CROSSING CIRCLE - #204
City-St-Zip: BRANDON, FL 33511 US

Title: TREA () Delete
Name: GARMON, CARLA R
Address: 403 HOLIDAY TERRACE
City-St-Zip: BRANDON, FL 335115533 US

Title: DIRE () Delete
Name: JARNEGAN, OCTAVIA L
Address: 4811 BRISTOL BAY WAY
City-St-Zip: TAMPA, FL 33619 US

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:

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: BRUCE E. GARMON, SR.

REV

05/01/2008

Electronic Signature of Signing Officer or Director

_____ Date