

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005676

FILED  
Feb 15, 2009  
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 ( )

## Name and Address of Current Registered Agent:

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

02/15/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date