2007 NOT-FOR-PROFIT CORPORATION

SIGNATURE:

FILED **ANNUAL REPORT** Apr 24, 2007 08:00 Al Secretary of State **DOCUMENT # N04000006631** 1. Entity Name EAGLE MINISTRIES, INC. Principal Place of Business Mailing Address 3709 S ALASKA ST 3709 S ALASKA ST TACOMA, WA 98418 TACOMA, WA 98418 04072007 No Chg-NP CR2E037 (4/06) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 30-0263341 Not Applicable C., \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HOSKINS, TAMMY DO NOT WRITE **8839 NW 57ST PLACE** CORAL SPRINGS, FL 33067 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. U00000728755 05/08/07-80012-007 61.25 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) U000000728755 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 05/08/07-80012-008 8.75 Trust Fund Contribution. Added to Fees Due by May 1, 2007 10. OFFICERS AND DIRECTORS IIILE PRES NAME THOMAS, DANNY R STREET ADDRESS 3709 S ALASKA ST CITY-ST-ZIP TACOMA, WA 98418 TITLE TREA NAME ELDER, JARED STREET ADDRESS 590 N. HICKORY BLVD CITY-ST-ZIP DES MOINES, IA 50317 TITLE NAME GRUENER, ROGER STREET ADDRESS 615 37TH AVE NW DO NOT WRITE CITY-ST-ZIP GIG HARBOR, WA 98335 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.