

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006758

FILED
Feb 16, 2009
Secretary of State

Entity Name: RICK ELKINS MINISTRIES INCORPORATED

Current Principal Place of Business:

1482 HIGHLAND CIR
CLEARWATER, FL 33755

New Principal Place of Business:

Current Mailing Address:

1482 HIGHLAND CIR
CLEARWATER, FL 33755

New Mailing Address:

FEI Number: 42-1632805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELKINS, RICKEY L
1482 HIGHLAND CIR
CLEARWATER, FL 33755 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: D () Delete
Name: ELKINS, RICKEY L
Address: 1482 HIGHLAND CIR
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: ELKINS, PATRICIA A
Address: 1482 HIGHLAND CIR
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: WYATT, ERICA R
Address: 1482 HIGHLAND CIR
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: MCABEE, DAVID A
Address: 1204 FAIRBURN AVE
City-St-Zip: CLEARWATER, FL 34615

Title: D () Delete
Name: MCABEE, PATRICIA J
Address: 1204 FAIRBURN AVE
City-St-Zip: CLEARWATER, FL 34615

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: RICKEY L. ELKINS

D

02/16/2009

Electronic Signature of Signing Officer or Director

Date