2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# N04000006933

Entity Name: GRATEFUL HEART MINISTRY, INCORPORATED

Current Principal Place of Business:

1400 LEMHURST RD.
PENSACOLA, FL 32507

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 17363
PENSACOLA, FL 32522

New Mailing Address:

P.O. BOX 16464
PENSACOLA, FL 32507

FEI Number: 20-1456046 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROWN, MARILYN
1400 LEMHURST RD.
PENSACOLA, FL 32507 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	( ) Delete
Name:	BROWN, MARILYN	
Address:	1400 LEMHURST RD.	
City-St-Zip:	PENSACOLA, FL 32507	
Title:	ST	( ) Delete
Name:	BROWN, MARY	
Address:	5649 TREVINO DR.	
City-St-Zip:	MILTON, FL 32570	
Title:	D	( ) Delete
Name:	ISBELL, RANDALL	
Address:	1401 LAKE DRIVE	
City-St-Zip:	CANTONMENT, FL 32533	
Title:	D	( ) Delete
Name:	ISBELL, DELIA A	
Address:	1401 LAKE DRIVE	
City-St-Zip:	CANTONMENT, FL	
Title:	D	( ) Delete
Name:	FREEMAN, VALERIE	
Address:	7160 PENNINGTON DRIVE	
City-St-Zip:	PENSACOLA, FL 32536	

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: MARILYN BROWN P 04/28/2008

Electronic Signature of Signing Officer or Director — Date