

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006933

FILED  
Apr 29, 2009  
Secretary of State

**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 16464  
PENSACOLA, FL 32507

**New Mailing Address:**

P.O. BOX 3742  
MILTON, FL 32572

**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: P (X) Change ( ) Addition  
Name: PERRY, MARILYN R BROWN-  
Address: 1400 LEMHURST RD.  
City-St-Zip: PENSACOLA, FL 32507

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 R. BROWN- PERRY

P

04/29/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date