

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N04000007837

1. Entity Name

STEVE WHITNEY MINISTRIES, INC.



Principal Place of Business

7387 CLEARWATER DR
SPRING HILL, FL 34606

Mailing Address

7387 CLEARWATER DR
SPRING HILL, FL 34606

DO NOT WRITE IN THIS SPACE

FILED
Sep 09, 2008 08:00 AM
Secretary of State



09052008 No Chg-NP

CR2E037 (4/06)

4. FEI Number

33-1084075

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WHITNEY, STEVE
7387 CLEARWATER DR
SPRING HILL, FL 34606

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IN THIS SPACE**

8. 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	WHITNEY, STEVE
STREET ADDRESS	7387 CLEARWATER DR
CITY-ST-ZIP	SPRING HILL, FL 34606
TITLE	D
NAME	WHITNEY, LATIKA
STREET ADDRESS	7387 CLEARWATER DR
CITY-ST-ZIP	SPRING HILL, FL 34606
TITLE	D
NAME	CLEMONS, TONJA
STREET ADDRESS	4870 PLANTERS RIDGE DR
CITY-ST-ZIP	TALLAHASSEE, FL 32311
TITLE	D
NAME	TURNER, HENRY
STREET ADDRESS	2524 SPRING FOREST ROAD
CITY-ST-ZIP	TALLAHASSEE, FL 32301
TITLE	D
NAME	JOHNSON, LISA
STREET ADDRESS	942 CEDAR DR PO BOX 12403
CITY-ST-ZIP	BROOKSVILLE, FL 34603
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000959252
09/09/08-80003-010 70.00%

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IN THIS SPACE**

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-3-08 (352) 398-2684
Date Daytime Phone #