

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008207

FILED
Apr 28, 2007
Secretary of State

Entity Name: 2ND MILE MINISTRIES, INC.

Current Principal Place of Business:

9951 ATLANTIC BLVD
130
JACKSONVILLE, FL 322256542 US

New Principal Place of Business:

Current Mailing Address:

9951 ATLANTIC BLVD
130
JACKSONVILLE, FL 322256542 US

New Mailing Address:

FEI Number: 73-1715604 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHRIEBER, GLEN A
1380 SUN MARSH DRIVE
JACKSONVILLE, FL 32225 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: PRES () Delete
Name: COLLINS, DAVID
Address: 319 WEST 24TH STREET
City-St-Zip: JACKSONVILLE, FL 32206 US

Title: SECR () Delete
Name: FOSTER, MARYANN
Address: 1700 SAN PABLO ROAD SOUTH, #712
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: TREA () Delete
Name: FOSTER, JASON
Address: 1700 SAN PABLO ROAD SOUTH, #712
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: DIRE () Delete
Name: ST. DENIS, DON
Address: 3210 SAN JOSE BOULEVARD
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: DIRE () Delete
Name: HILL, LOUISE
Address: 6720 NORWOOD AVENUE
City-St-Zip: JACKSONVILLE, FL 32208

Title: DIRE () Delete
Name: SPENCER, GEORGE
Address: 1040 PENMAN ROAD
City-St-Zip: NEPTUNE BEACH, FL 32266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SECR (X) Change () Addition
Name: FOSTER, MARYANN
Address: 4225 NOTTER AVENUE
City-St-Zip: JACKSONVILLE, FL 32206 US

Title: TREA (X) Change () Addition
Name: FOSTER, JASON
Address: 4225 NOTTER AVENUE
City-St-Zip: JACKSONVILLE, FL 32206 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DIRE (X) Change () Addition
Name: HILL, LOUISE
Address: 10818 LYDIA ESTATES DRIVE
City-St-Zip: JACKSONVILLE, FL 32218

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: MARYANN FOSTER

SECR

04/28/2007

Electronic Signature of Signing Officer or Director

_____ Date