

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009573

FILED
Jan 11, 2008
Secretary of State

Entity Name: SANCTUARY OF ENDURING FAITH MINISTRIES, INC.

Current Principal Place of Business:

12551 NE 25TH AVE
ANTHONY, FL 32617

New Principal Place of Business:

1001 NE 16TH AVE
GAINESVILLE, FL 32609

Current Mailing Address:

PO BOX 876
CITRA, FL 32113

New Mailing Address:

FEI Number: 20-2229524

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEARD, TERRELL E
12551 NE 25TH AVE
ANTHONY, FL 32617 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: BEARD, TERRELL E PASTOR
Address: 12551 NE 25TH AVE
City-St-Zip: ANTHONY, FL 32617

Title: VP () Delete
Name: BEARD, LESIA D
Address: 12551 NE 25TH AVE
City-St-Zip: ANTHONY, FL 32617

Title: S () Delete
Name: COLEMAN, BETTY
Address: PO BOX 876
City-St-Zip: CITRA, FL 32113

Title: T () Delete
Name: DAVIS, JESHEARE
Address: 1618 NW 1ST AVENUE
City-St-Zip: OCALA, FL 34475

Title: T () Delete
Name: SMITH, KATRINA TRUST
Address: 3031 NE 14TH ST
City-St-Zip: GAINESVILLE, FL 32609

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: TERRELL E. BEARD

P

01/11/2008

Electronic Signature of Signing Officer or Director

Date