2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009573

FILED Apr 12, 2012 Secretary of State

Entity Name: SANCTUARY OF ENDURING FAITH MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business:

1001 NE 16TH AVE GAINESVILLE, FL 32609

Current Mailing Address: New Mailing Address:

PO BOX 876 CITRA, FL 32113

FEI Number: 20-2229524 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BEARD, TIMMOTHY L 12551 NE 25TH AVE ANTHONY, FL 32617

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: F

Name: BEARD, TERRELL E PASTOR

US

Address: 12551 NE 25TH AVE City-St-Zip: ANTHONY, FL 32617

Title: VP

 Name:
 BEARD, LESIA D

 Address:
 12551 NE 25TH AVE

 City-St-Zip:
 ANTHONY, FL 32617

Title: S

Name: COLEMAN, BETTY Address: PO BOX 876 City-St-Zip: CITRA, FL 32113

Title:

 Name:
 DAVIS, JESHEARE

 Address:
 1618 NW 1ST AVENUE

 City-St-Zip:
 OCALA, FL 34475

Title:

Name: SMITH, KATRINA TRUST Address: 3031 NE 14TH ST City-St-Zip: GAINESVILLE, FL 32609

Title: TRUS

 Name:
 TURNER, GERALD

 Address:
 205 SW 16TH AV APT 14C

 City-St-Zip:
 GAINESVILLE, FL 32601

I hereby 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 all other like empowered.

SIGNATURE: TERRELL E. BEARD P 04/12/2012