

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010508

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: GARDEN MINISTRIES, INC.

## Current Principal Place of Business:

975 SW BAY STATE RD.  
PORT ST. LUCIE, FL 34953

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 880566  
PORT ST. LUCIE, FL 34988

## New Mailing Address:

FEI Number: 20-1852026

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BARRETO, SCOTT E REV  
975 SW BAY STATE RD.  
PORT ST. LUCIE, FL 34953 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: BARRETO, SCOTT E REV  
Address: 975 SW BAY STATE RD  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: VP ( ) Delete  
Name: BARRETO, MICHELLE M  
Address: 975 SW BAY STATE RD  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: D ( ) Delete  
Name: GREEN, CHARLES H REV  
Address: 2105 ARCH CREEK DRIVE  
City-St-Zip: NORTH MIAMI, FL 33181

Title: D ( ) Delete  
Name: GREEN, SYLVIA REV  
Address: 2105 ARCH CREEK DRIVE  
City-St-Zip: NORTH MIAMI, FL 33181

Title: D ( ) Delete  
Name: COCHRAN, WAYNE REV  
Address: 3566 SW 180 WAY  
City-St-Zip: PEMBROKE PINES, FL 33029

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition  
Name: GREEN, CHARLES H REV  
Address: 2110 LAKE ADGER PARKWAY  
City-St-Zip: MILL SPRING, NC 28756

Title: D (X) Change ( ) Addition  
Name: GREEN, SYLVIA REV  
Address: 2110 LAKE ADGE PARKWAY  
City-St-Zip: MILL SPRING, NC 28756

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: SCOTT E BARRETO

P

04/30/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date