2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2007
Secretary of State

DOCUMENT# N04000010663

Entity Name: DLW MINISTRIES, INC

Current Principal Place of Business:

10215 BARRINGTON CT
LEESBURG, FL 34788

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 895478
LEESBURG, FL 34789

New Mailing Address:

FEI Number: 20-1868155 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, DANNIE L
10215 BARRINGTON CT
LEESBURG, FL 34788 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: WILLIAMS, DANNIE L
Address: 10215 BARRINGTON CT
City-St-Zip: LEESBURG, FL 34788

Title: VP ( ) Delete
Name: WILLIAMS, PRECIUOS B
Address: 10215 BARRINGTON CT
City-St-Zip: LEESBURG, FL 34788

Title: D ( ) Delete
Name: DIXON, HOWARD SR
Address: 1759 WATERVIEW DR
City-St-Zip: LEESBURG, FL 34748

Title: D ( ) Delete
Name: DIXON, DOLLY
Address: 1759 WATERVIEW DR
City-St-Zip: LEESBURG, FL 34748

Title: D ( ) Delete
Name: WILLIAMS, JEREMY
Address: 10215 BARRINGTON CT
City-St-Zip: LEESBURG, FL 34788

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 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: DANNIE WILLIAMS P 01/04/2007

Electronic Signature of Signing Officer or Director — Date