

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011250

FILED
Mar 06, 2008
Secretary of State

Entity Name: DEBORAH GRAHAM MINISTRIES, INC. GLORY & FIRE

Current Principal Place of Business:

10503 BERMUDA ISLE DR.
TAMPA, FL 336472721

New Principal Place of Business:

Current Mailing Address:

10503 BERMUDA ISLE DR.
TAMPA, FL 336472721

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAHAM, DEBORAH E
10503 BERMUDA ISLE DR.
TAMPA, FL 336472721 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: MRS. () Delete
Name: GRAHAM, DEBORAH E
Address: 10503 BERMUDA ISLE DR.
City-St-Zip: TAMPA, FL 336472721

Title: MS. () Delete
Name: GRAHAM, ASHLEY
Address: 10503 BERMUDA ISLE DR.
City-St-Zip: TAMPA, FL 336472721

Title: D () Delete
Name: GRAHAM, KERRY
Address: 10503 BERMUDA ISLE DR.
City-St-Zip: TAMPA, FL 336472721

Title: D () Delete
Name: GRAHAM, SHAUN
Address: 10503 BERMUDA ISLE DR.
City-St-Zip: TAMPA, FL 336472721

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:

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: DEBORAH GRAHAM

Electronic Signature of Signing Officer or Director

MRS

03/06/2008

_____ Date