2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2008
Secretary of State

DOCUMENT# N05000000209

Entity Name: GOD BLESS MINISTRIES, INC.

Current Principal Place of Business:

2216 BARBARA DRIVE
CLEARWATER, FL 34764

New Principal Place of Business:

Current Mailing Address:

2216 BARBARA DRIVE
CLEARWATER, FL 34764

New Mailing Address:

FEI Number: 74-3062772 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MCLAUGHLIN, JOHN
2216 BARBARA DRIVE
CLEARWATER, FL 34764 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: DP ( ) Delete
Name: MCLAUGHLIN, JOHN
Address: 2216 BARBARA DRIVE
City-St-Zip: CLEARWATER, FL 34764

Title: DV ( ) Delete
Name: MCLAUGHLIN, LAUREN
Address: 2216 BARBARA DRIVE
City-St-Zip: CLEARWATER, FL 34764

Title: DS ( ) Delete
Name: ANDERSON, ELIZABETH
Address: 532 W. 5TH STREET
City-St-Zip: CONCORDIA, KS 66901

Title: DT ( ) Delete
Name: ANDERSON, RAY
Address: 532 W. 5TH STREET
City-St-Zip: CONCORDIA, KS 66901

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: JOHN MCLAUGHLIN DP 07/11/2008

Electronic Signature of Signing Officer or Director — Date