

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003376

FILED
Apr 01, 2009
Secretary of State

Entity Name: CHURCH OF CHRIST MINISTRIES INC.

Current Principal Place of Business:

1544 FOREST HILLS RD.
JACKSONVILLE, FL 32208

New Principal Place of Business:

Current Mailing Address:

1544 FOREST HILLS RD.
JACKSONVILLE, FL 32208

New Mailing Address:

FEI Number: 43-2079355

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KINSEY, JAMES
1544 FOREST HILLS RD.
JACKSONVILLE, FL 32208 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: PC () Delete
Name: KINSEY, JAMES
Address: 1544 FOREST HILLS RD.
City-St-Zip: JACKSONVILLE, FL 32208

Title: V () Delete
Name: KINSEY, BRENDA
Address: 1544 FOREST HILLS RD.
City-St-Zip: JACKSONVILLE, FL 32208

Title: S () Delete
Name: KINSEY, LAURA
Address: 2119 TUSKEGEE RD
City-St-Zip: JACKSONVILLE, FL 32209

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:

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: JAMES KINSEY

REV

04/01/2009

Electronic Signature of Signing Officer or Director

Date