

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004290

FILED
Apr 23, 2008
Secretary of State

Entity Name: EVENSONG WEST MINISTRIES, INC.

Current Principal Place of Business:

PMB 545, 21010 SOUTHBANK ST.
STERLING, VA 20165 US

New Principal Place of Business:

Current Mailing Address:

PMB 545, 21010 SOUTHBANK ST.
STERLING, VA 20165 US

New Mailing Address:

FEI Number: 30-0358926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RELIGIOUS SCIENCE CHURCH OF MARION CO. &
SCIENCE OF MIND CENTER INC. OAKBROOK LIFE
ENRICHMENT CENTER. 1009 NE 28TH AVE
OCALA, FL 34470 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: TAYLOR, HILARY J REV
Address: PMB 545,21010 SOUTHBANK ST
City-St-Zip: STERLING, VA 20165 US

Title: VP () Delete
Name: GORDON, DAVID
Address: 597 FLORIDA AVE
City-St-Zip: HERNDON, VA 20170 US

Title: TR () Delete
Name: STINE, WILLIAM
Address: 1052 PERTH RD
City-St-Zip: TROUTMAN, NC 28166 US

Title: SEC () Delete
Name: LAWRENCE, MARILYN
Address: 93 WATERLOO ST
City-St-Zip: WARRENTON, VA 20186 US

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: HILARY J TAYLOR

PRES

04/23/2008

Electronic Signature of Signing Officer or Director

Date