## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000004573

FILED May 03, 2010 Secretary of State

Entity Name: WAR SURVIVORS MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business:

330 AVE B SW

# 10

WINTER HAVEN, FL 33880

Current Mailing Address: New Mailing Address:

330 AVE B SW

# 10

WINTER HAVEN, FL 33880

FEI Number: 26-0117252 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: Name and Address of New Registered Agent:

SCHADRAC, BINYENZI 114 LESLIE AVE # 10

WINTER HAVEN, FL 33880 US

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: [

Name: DOLDE, DONAVAN
Address: 921 HILLGROVE LANE
City-St-Zip: AUBURNDALE, FL 33823

Title: D

Name: KIMSEY, KEITH
Address: 616 VICTORIA SQUARE
City-St-Zip: LAKELAND, FL 33813

Title:

Name: KENNEDY, KEITH

Address: 1551 ROYAL FOREST LOOP City-St-Zip: LAKELAND, FL 33811

Title: D

 Name:
 ABLE, ROGER

 Address:
 5 MAPLE PLACE

 City-St-Zip:
 HAINES CITY, FL 33884

Title: D

Name: BURSE, GABY
Address: 2438 RAVEN CROFT CT
City-St-Zip: ORLANDO, FL 32837

Title: [

Name: LATONA, RICHARD
Address: 6655 ROYAL FOREST DR
City-St-Zip: LAKELAND, FL 33811

I hereby 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 all other like empowered.

SIGNATURE: BEN SCHADRAC MR 05/03/2010