2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2008
Secretary of State

DOCUMENT# N05000005357

Entity Name: "THE CHURCH" PARISH NURSE MINISTRIES, INC.

Current Principal Place of Business:

699 WEST STREET
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

Current Mailing Address:

699 WEST STREET
NEW SMYRNA BEACH, FL 32168

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:

HUDSON, FANNIE M
699 WEST STREET
NEW SMYRNA BEACH, FL 32168 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: DIR ( ) Delete
Name: HUDSON, JAMES E SR.
Address: 699 WEST STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: DIR ( ) Delete
Name: HUDSON, FANNIE M
Address: 699 WEST STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: DIR ( ) Delete
Name: BATTS-HUDSON, LAURA J
Address: 1612 HIGH POINTE LANE
City-St-Zip: CEDAR HILL, TX 75104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DIR (X) Change ( ) Addition
Name: COLLINS, LAURA J
Address: 5132 FINNHORSE DRIVE
City-St-Zip: GRAND PRAIRIE, TX 75052

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: FANNIE M. HUDSON DIR 03/30/2008
Electronic Signature of Signing Officer or Director — Date