

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005816

FILED
May 01, 2007
Secretary of State

Entity Name: A LEAP OF FAITH GLOBAL MINISTRIES INC.

Current Principal Place of Business:

508 N MADISON ST
QUINCY, FL 32351

New Principal Place of Business:

333 CIRCLE DRIVE
QUINCY, FL 32351

Current Mailing Address:

508 N MADISON ST
QUINCY, FL 32351

New Mailing Address:

333 CIRCLE DRIVE
QUINCY, FL 32351

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

GEE, NANCY
508 N MADISON ST
QUINCY, FL 32351 US

Name and Address of New Registered Agent:

GEE, NANCY
333 CIRCLE DRIVE
QUINCY, FL 32351 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:

05/01/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: GEE, NANCY
Address: 508 N MADISON ST
City-St-Zip: QUINCY, FL 32351

Title: D () Delete
Name: NEWBON, PRISCILLA
Address: 1045 EPPING FOREST DR
City-St-Zip: TALLAHASSEE, FL

Title: D () Delete
Name: AR'DIS, MARY
Address: 2750 OLD ST AUGUSTINE RD
City-St-Zip: TALLAHASSEE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MGR (X) Change () Addition
Name: GEE, NANCY
Address: 333 CIRCLE DRIVE
City-St-Zip: QUINCY, FL 32351

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: NANCY GEE

MGR.

05/01/2007

Electronic Signature of Signing Officer or Director

Date