

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006257

FILED
Apr 28, 2006
Secretary of State

Entity Name: HURSTON MINISTRIES, INC.

Current Principal Place of Business:

111 SHIRLEY DR.
GULF BREEZE, FL 32561

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 385
GULF BREEZE, FL 325620385

New Mailing Address:

FEI Number: 20-3907164

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HURSTON, KAREN L
111 SHIRLEY DR.
GULF BREEZE, FL 32561 US

Name and Address of New Registered Agent:

HURSTON, KAREN L
109 SHIRLEY DR.
GULF BREEZE, FL 32561 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: KAREN HURSTON

04/28/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: HURSTON, KAREN L
Address: 111 SHIRLEY DR.
City-St-Zip: GULF BREEZE, FL 32561

Title: D () Delete
Name: HURSTON, JOHN W
Address: 111 SHIRLEY DR.
City-St-Zip: GULF BREEZE, FL 32561

Title: D () Delete
Name: GANLEY, ROBERT W
Address: 111 SHIRLEY DR.
City-St-Zip: GULF BREEZE, FL 32561

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: HURSTON, KAREN L REV.
Address: 109 SHIRLEY DR.
City-St-Zip: GULF BREEZE, FL 32561

Title: D (X) Change () Addition
Name: LIPSCOMB, BUFORD REV.
Address: 221 SOUTH BLUE ANGEL PARKWAY
City-St-Zip: PENSACOLA, FL 32506

Title: D (X) Change () Addition
Name: GANLEY, ROBERT W REV.
Address: 5270 PALE MOON DRIVE
City-St-Zip: PENSACOLA, FL 32507

Title: D () Change (X) Addition
Name: FELTSCHAU, LOUIS R REV.
Address: 3454 MARCUS POINTE BOULEVARD
City-St-Zip: PENSACOLA, FL 32505

I hereby certify that the information supplied with this filing does not qualify for the 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: KAREN HURSTON

PSD

04/28/2006

Electronic Signature of Signing Officer or Director

Date