

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008092

FILED  
Jun 04, 2007  
Secretary of State

**Entity Name:** EXPLOITS FOR GOD MINISTRIES, INC.

**Current Principal Place of Business:**

19302 GUNN HIGHWAY  
ODESSA, FL 33556 US

**New Principal Place of Business:**

18934 N. DALE MABRY HIGHWAY  
LUTZ, FL 33548 US

**Current Mailing Address:**

19302 GUNN HIGHWAY  
ODESSA, FL 33556 US

**New Mailing Address:**

P.O. BOX 128  
ODESSA, FL 33556 US

**FEI Number:** 20-3330263 **FEI Number Applied For ( )** **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:**

HOWELL, BYRON  
19302 GUNN HIGHWAY  
ODESSA, FL 33556 US

**Name and Address of New Registered Agent:**

HOWELL, BYRON B  
14518 THORNFIELD COURT  
TAMPA, FL 33624 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: BYRON B HOWELL

06/04/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: HOWELL, BYRON B  
Address: 19302 GUNN HIGHWAY  
City-St-Zip: ODESSA, FL 33556 US

Title: SECY ( ) Delete  
Name: HOWELL, KEVIN E JR.  
Address: 19302 GUNN HIGHWAY  
City-St-Zip: ODESSA, FL 33556 US

Title: VP ( ) Delete  
Name: ELSEY, SHANNON R  
Address: 5385 PEACHTREE DUNWOODY ROAD #1136  
City-St-Zip: ATLANTA, GA 30342 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: HOWELL, BYRON B  
Address: 14518 THORNFIELD COURT  
City-St-Zip: TAMPA, FL 33624 US

Title: SECY (X) Change ( ) Addition  
Name: HOWELL, KEVIN E JR.  
Address: P.O. BOX 128  
City-St-Zip: ODESSA, FL 33556 US

Title: VP (X) Change ( ) Addition  
Name: HOWELL, SHANNON E  
Address: 14518 THORNFIELD COURT  
City-St-Zip: TAMPA, FL 33624 US

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: BYRON B HOWELL

PRES

06/04/2007

Electronic Signature of Signing Officer or Director

Date