

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009768

FILED  
Jan 13, 2008  
Secretary of State

Entity Name: OVERFLOW MINISTRIES, INC.

## Current Principal Place of Business:

2505 THONOTOSASSA ROAD  
PM BOX#202  
PLANT CITY, FL 33563

## New Principal Place of Business:

## Current Mailing Address:

2505 THONOTOSASSA ROAD  
PM BOX #202  
PLANT CITY, FL 33563

## New Mailing Address:

2505 THONOTOSASSA ROAD  
PM BOX#202  
PLANT CITY, FL 33563

FEI Number: 20-3509812

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

QUINCEY, JOSHUA E MR.  
2706 SAVANNAH DR.  
PLANT CITY, FL 33563 US

## Name and Address of New Registered Agent:

HEMPHILL, BRETT MR.  
13207 W HWY 92 E  
DOVER, FL 33527 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: BRETT C. HEMPILL

01/13/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: MR ( ) Delete  
Name: HEMPILL, BRETT C  
Address: 13207 W HWY 92 E  
City-St-Zip: DOVER, FL 33527

Title: MRS. ( ) Delete  
Name: LANGSTON, MELANIE J  
Address: 5745 HARVEY TEW RD.  
City-St-Zip: PLANT CITY, FL 33565

Title: MR ( ) Delete  
Name: LANGSTON, MICHAEL  
Address: 5745 HARVEY TEW ROAD  
City-St-Zip: PLANT CITY, FL 33565

Title: MR. ( ) Delete  
Name: GOMEZ, ALEX  
Address: 8122 SIMPSON LANE  
City-St-Zip: LAKELAND, FL 33809

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: MR (X) Change ( ) Addition  
Name: HEMPILL, RICH  
Address: PO BOX 615  
City-St-Zip: LAKE ALFRED, FL 33850

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: MELANIE J LANGSTON

SEC

01/13/2008

Electronic Signature of Signing Officer or Director

Date