2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N05000009819

Entity Name: TRUTH MINISTRIES OF OCALA, FLORIDA INC.

Current Principal Place of Business:

2940 NORTHEAST 35TH STREET
OCALA, FL 34479

New Principal Place of Business:

Current Mailing Address:

2940 NORTHEAST 35TH STREET
OCALA, FL 34479

New Mailing Address:

FEI Number: 20-3391069 **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:

WITT, TERRY
3205 NORTHEAST 49TH STREET
OCALA, FL 34479 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: P ( ) Delete
Name: WITT, TERRY
Address: 3205 NORTHEAST 49TH STREET
City-St-Zip: OCALA, FL 34479

Title: S ( ) Delete
Name: LEE, TERRY
Address: 13671 HIGHWAY 389
City-St-Zip: FIELDS, LA 70653

Title: T ( ) Delete
Name: MEADE, DONALD
Address: P.O. BOX 6208
City-St-Zip: AKRON, OH 44312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change ( ) Addition
Name: BASS, THOMAS W
Address: 3205 NORTHEAST 49TH STREET
City-St-Zip: OCALA, FL 34479

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: TERRY WITT P 05/01/2009

Electronic Signature of Signing Officer or Director Date