

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009961

FILED
Mar 28, 2009
Secretary of State

Entity Name: EXTREME EVANGELISM MINISTRY, INC.

Current Principal Place of Business:

6244 RIVIERA LN
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

6244 RIVIERA LN
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 20-4450557

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURNER, BRYAN P
6244 RIVIERA LN
JACKSONVILLE, FL 32216 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: PST () Delete
Name: TURNER, BRYAN P
Address: 6244 RIVIERA LN
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: D () Delete
Name: TURNER, JOY
Address: 6244 RIVIERA LN
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: T () Delete
Name: BOWDEN, WALLY
Address: 12700 BARTRAM PARK BLVD #1930
City-St-Zip: JACKSONVILLE, FL 32258 US

Title: D () Delete
Name: HOUGHTON, BRIAN
Address: 5046 KNIGHTS BRIDGE CIR N
City-St-Zip: ORANGE PARK, FL 32073 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change () Addition
Name: HOUGHTON, BRIAN
Address: 16316C MORAN PLACE
City-St-Zip: FORT POLK, LA 71459 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: BRYAN TURNER

PST

03/28/2009

Electronic Signature of Signing Officer or Director

Date