

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010816

FILED
Aug 03, 2007
Secretary of State

Entity Name: X-GENERATION MINISTRY, INCORPORATION

Current Principal Place of Business:

1140 E. TURNER CAMP RD.
INVERNESS, FL 34453

New Principal Place of Business:

Current Mailing Address:

1140 E. TURNER CAMP RD.
INVERNESS, FL 34453

New Mailing Address:

FEI Number: 20-3829258 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:

Name and Address of New Registered Agent:

SMITH, FRANK III
1140 E. TURNER CAMP RD.
INVERNESS, FL 34453 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SMITH, FRANK III
Address: 1140 E. TURNER CAMP RD.
City-St-Zip: INVERNESS, FL 34453

Title: DS () Delete
Name: NOTTINGHAM, NICOLE
Address: 1140 E. TURNER CAMP RD.
City-St-Zip: INVERNESS, FL 34453

Title: TD () Delete
Name: LIEBERMAN, MELISSA
Address: 1140 E. TURNER CAMP RD.
City-St-Zip: INVERNESS, FL 34453

Title: ED () Delete
Name: LIEBERMAN, COLIN
Address: 1140 E. TURNER CAMP RD.
City-St-Zip: INVERNESS, FL 34453

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DS (X) Change () Addition
Name: JONES, TOYA
Address: 1140 E. TURNER CAMP RD.
City-St-Zip: INVERNESS, FL 34453

Title: TD (X) Change () Addition
Name: WILLIAMS, EARLENE
Address: 1140 E. TURNER CAMP RD.
City-St-Zip: INVERNESS, FL 34453

Title: ED (X) Change () Addition
Name: JONES, MAJOR C II
Address: 1140 E. TURNER CAMP RD.
City-St-Zip: INVERNESS, FL 34453

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: FRANK SMITH III

PD

08/03/2007

Electronic Signature of Signing Officer or Director

Date