2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N05000011069

Entity Name: OH GLORY MINISTRIES INC

Current Principal Place of Business:

1544 N LAWNWOOD CIRCLE
FT. PIERCE, FL 34950

New Principal Place of Business:

Current Mailing Address:

P.O BOX 423
FT. PIERCE, FL 34954

New Mailing Address:

FEI Number: 73-1733109 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

CARTER, BRENDA Y
1544 N LAWNWOOD CIRCLE
FT. PIERCE, FL 34950 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: MCGLOTHINE - MOORE, CHRISTINE
Address: 2928 COSTELLO AVENUE
City-St-Zip: CINCINNATI, OH 45211

Title: VP ( ) Delete
Name: CARTER, BRENDA Y
Address: 1544 N LAWNWOOD CIRCLE
City-St-Zip: FT. PIERCE, FL 34950

Title: SECT ( ) Delete
Name: COOPER, CORA
Address: 800 W FIRST STREET
City-St-Zip: RIVIERA BEACH, FL 33404

Title: TREA ( ) Delete
Name: HYLICK, ALTAMESE S
Address: 1544 N LAWNWOOD CIRCLE
City-St-Zip: FT. PIERCE, FL 34950

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: ( ) 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: BRENDA Y. CARTER VP 05/01/2009

Electronic Signature of Signing Officer or Director — Date