

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011382

FILED
Jan 21, 2008
Secretary of State

Entity Name: EAGLE VIEW MINISTRIES INC.

Current Principal Place of Business:

12481 NESTING EAGLE WAY
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

2771-29 MONUMENT RD
323
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 20-4196958

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TERRELL, BRANDON M SR
12481 NESTING EAGLE WAY
JACKSONVILLE, FL 32225 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: TERRELL, BRANDON M SR
Address: 12481 NESTING EAGLE WAY
City-St-Zip: JACKSONVILLE, FL 32225

Title: V () Delete
Name: GREENE, SAMUEL N
Address: 12481 NESTING EAGLE WAY
City-St-Zip: JACKSONVILLE, FL 32225

Title: T () Delete
Name: TERRELL, PHYLLIS M
Address: 12481 NESTING EAGLE WAY
City-St-Zip: JACKSONVILLE, FL 32225

Title: S () Delete
Name: TERRELL, SHANELL
Address: 5811 ATLANTIC BLVD #217
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: GREENE, SAMUEL N
Address: 13793 SHADY WOODS LANE
City-St-Zip: JACKSONVILLE, FL 32224

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: SHANELL TERRELL

S

01/21/2008

Electronic Signature of Signing Officer or Director

Date