

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001823

FILED
May 30, 2009
Secretary of State

Entity Name: MIGHTY ARM MINISTRIES, INC.

Current Principal Place of Business:

6231 SPRING FOREST CIR
JACKSONVILLE, FL 32216

New Principal Place of Business:

10109 GENI HILL CIR
JACKSONVILLE, FL 32225

Current Mailing Address:

6231 SPRING FOREST CIR
JACKSONVILLE, FL 32216

New Mailing Address:

10109 GENI HILL CIR
JACKSONVILLE, FL 32225

FEI Number: 20-2662283 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:

WELCH, RUSSELL G REV
6231 SPRING FOREST CIR
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

WELCH, RUSSELL G REV
10109 GENI HILL CIR N
JACKSONVILLE, FL 32225 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: RUSSELL G WELCH

05/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: WELCH, RUSSELL G REV
Address: 6231 SPRING FOREST CIR
City-St-Zip: JACKSONVILLE, FL 32216

Title: DT () Delete
Name: WELCH, EMELIE R REV
Address: 6209 BLANCHARD ROAD
City-St-Zip: JACKSONVILLE, FL 32216

Title: DS () Delete
Name: BUCKLAND, ROBERT
Address: 4 SAILFISH DR
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D () Delete
Name: YOUNG, DAVID
Address: PO BOX 3132
City-St-Zip: JACKSONVILLE, FL 32206

Title: D () Delete
Name: PAXTON, DUSTY REV
Address: 11013 CASTLEMAN CIRCLE E
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change () Addition
Name: WELCH, RUSSELL G REV
Address: 10109 GENI HILL CIR N
City-St-Zip: JACKSONVILLE, FL 32225

Title: DT (X) Change () Addition
Name: WELCH, EMELIE R REV
Address: 10109 GENI HILL CIR N
City-St-Zip: JACKSONVILLE, FL 32225

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: RUSSELL G WELCH

PC

05/30/2009

Electronic Signature of Signing Officer or Director

Date