## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000003317

Entity Name: ACCESS UNLIMITED MINISTRIES, INC.

FILED Apr 08, 2008 Secretary of State

Current Principal Place of Business: New Principal Place	of Business:
--	--------------

137 WEST WALNUT AVENUE 137 WEST WALNUT AVENUE CRESTVIEW, FL 32536 CRESTVIEW, FL 32536 US

Current Mailing Address: New Mailing Address:

137 WEST WALNUT AVENUE 137 WEST WALNUT AVENUE CRESTVIEW, FL 32536 CRESTVIEW, FL 32536 US

FEI Number: 20-4251778 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JAMES, ELBERT 137 WEST WALNUT AVENUE CRESTVIEW, FL 32536 US

**OFFICERS AND DIRECTORS:** 

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

## Elocatorino digitataro di regiotoro

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D () Delete Title: D (X) Change () Addition

Name: JAMES, ALBERT Name: JAMES, ELBERT

 Address:
 137 WEST WALNUT AVENUE
 Address:
 137 WEST WALNUT AVENUE

 City-St-Zip:
 CRESTVIEW, FL 32536
 Crestview, FL 32536 US

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: ROSIER, JAMES D SR Name: ROSIER, JAMES D SR

Address: 29249 20TH WAY SOUTH
City-St-Zip: FEDERAL WAY, WA 98003

Natific: Redelet, Withe B Six
Redelet, With B B Six
Redelet, With B B Six
Redelet, Way Way SOUTH
City-St-Zip: FEDERAL WAY, WA 98003 US

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$ 

 Name:
 BOYD, JAMES J JR
 Name:
 BOYD, JAMES J JR

 Address:
 POST OFFICE BOX 18015
 Address:
 POST OFFICE BOX 18015

 City-St-Zip:
 SEATTLE, WA 98118
 City-St-Zip:
 SEATTLE, WA 98118 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: ELBERT JAMES D 04/08/2008