
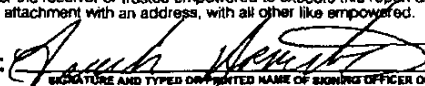


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 30, 2007 8:00 am
Secretary of State

07-11-2007 90077 050 ****70.00

DOCUMENT # N06000003861					
1. Entity Name PEOPLE HELPING PEOPLE FOR CHRIST MINISTRIES, INC.					
Principal Place of Business 1202 SHOTONA CT BRANDON, FL 33511			Mailing Address 1202 SHOTONA CT BRANDON, FL 33511		
2. Principal Place of Business - No P.O. Box # 9325 Bay Plaza Blvd			3. Mailing Address 1202 Shotona Ct		
Suite, Apt. #, etc. 202			Suite, Apt. #, etc.		
City & State Tampa FL			City & State Brandon FL		
Zip 33619		Country Hillsborough		Zip 33511	
				Country Hillsborough	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				4. FEI Number 11-3776387	
6. Name and Address of Current Registered Agent ARMSTRONG, ISIAH 1202 SHOTONA CT BRANDON, FL 33511				7. Name and Address of New Registered Agent Name Isiah ARMSTRONG Street Address (P.O. Box Number is Not Acceptable) 1202 Shotona Ct City Brandon FL Zip Code 33511	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small> DATE _____					
Filing Fee is \$61.25 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ARMSTRONG, ISIAH PASTOR 1202 SHOTONA CT BRANDON, FL 33511 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T HENDRIX, JOHN W JR. 30130 BARNABY LANE WESLEY CHAPEL, FL 33543 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S HENDRIX, NATASHA 30130 BARNABY LANE WESLEY CHAPEL, FL 33543 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		7-8-07		813-270-2370	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	

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07032007 Chg-NP CR2E037 (12/06)