

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003884

FILED  
Apr 06, 2009  
Secretary of State

Entity Name: PERHAPS TODAY MINISTRIES, INC.

## Current Principal Place of Business:

4670 BERRY RD  
HOLT, FL 32564

## New Principal Place of Business:

## Current Mailing Address:

4670 BERRY RD  
HOLT, FL 32564

## New Mailing Address:

FEI Number: 43-2103175

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CARPENTER, CECIL G JR.  
4670 BERRY RD  
HOLT, FL 32564 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: CARPENTER, CECIL G JR.  
Address: 4670 BERRY RD  
City-St-Zip: HOLT, FL 32564

Title: T ( ) Delete  
Name: CARPENTER, MARY K  
Address: 4670 BERRY RD  
City-St-Zip: HOLT, FL 32564

Title: D ( ) Delete  
Name: DESS, RHONDA  
Address: 487 MAZTEN LANE  
City-St-Zip: HOLT, FL 32564

Title: S ( ) Delete  
Name: DAWSON, GLENDA  
Address: 605 EAST SOUTHSIDE DR  
City-St-Zip: HOLT, FL 32564

Title: V ( ) Delete  
Name: SUTON, RYAN  
Address: 406 WEST MAIN STREET  
City-St-Zip: FESTUS, MO 63028

Title: D ( ) Delete  
Name: GAY, DANNY  
Address: 50 HATHCOCK ROAD  
City-St-Zip: APALACHICOLA, FL 32320

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change ( ) Addition  
Name: DEES, RHONDA  
Address: 487 MARTEN LANE  
City-St-Zip: HOLT, FL 32564

Title: V (X) Change ( ) Addition  
Name: ADAMS, SCOTT  
Address: 7884 RED BARROW RD  
City-St-Zip: BAKER, FL 32531

Title: D (X) Change ( ) Addition  
Name: SUTON, RYAN  
Address: 406 WEST MAIN STREET  
City-St-Zip: FESTUS, MO 63028

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: CECIL G. CARPENTER, JR.

REV

04/06/2009

Electronic Signature of Signing Officer or Director

Date