2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2009
Secretary of State

DOCUMENT# N06000004616

Entity Name: GREATER BLESSINGS MINISTRIES, INC.

Current Principal Place of Business:

2333 HANSEN LANE
SUITE 4
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

2333 HANSEN LANE
SUITE 4
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLARK, ALFRED W
2214 DEMERON RD
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

HARVEY, DEWAYNE K
2333 HANSEN LANE
SUITE #4
TALLAHASSEE, FL 32301 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: DEWAYNE K HARVEY 03/11/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HARVEY, DEWAYNE K
Address: 5250 17TH STREET, SUITE 101
City-St-Zip: SARASOTA, FL 34235

Title: VTD ( ) Delete
Name: HARVEY, DONNA
Address: 5250 17TH STREET, SUITE 101
City-St-Zip: SARASOTA, FL 34235

Title: SD ( ) Delete
Name: WILLIAMS, MONICA
Address: 286 CARTERWOOD DRIVE
City-St-Zip: TALLAHASSEE, FL 32310

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: HARVEY, DEWAYNE K
Address: 2333 HANSEN LANE
City-St-Zip: TALLAHASSEE, FL 32301

Title: VTD (X) Change ( ) Addition
Name: HARVEY, DONNA
Address: 2333 HANSEN LANE
City-St-Zip: TALLAHASSEE, FL 32301

Title: SD (X) Change ( ) Addition
Name: WILLIAMS, MONICA
Address: 2333 HANSEN LANE
City-St-Zip: TALLAHASSEE, FL 32301

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: DEWAYNE K HARVEY PD 03/11/2009
Electronic Signature of Signing Officer or Director Date