

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004913

FILED  
Apr 08, 2007  
Secretary of State

Entity Name: SONS OF SALVATION, INC.

## Current Principal Place of Business:

1223 W NEW YORK AVE  
DELAND, FL 32720

## New Principal Place of Business:

511 S LACY CIRCLE  
DELTONA, FL 32725

## Current Mailing Address:

690B E. RHODE ISLAND AVE  
ORANGE CITY, FL 32763

## New Mailing Address:

PO BOX 741522  
ORANGE CITY, FL 32774

FEI Number: 20-4087386

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BOGGS, GREG  
968 PADDINGTON TERRACE  
LAKE MARY, FL 32746 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: WARNER, DOW  
Address: 1223 W NEW YORK AVE  
City-St-Zip: DELAND, FL 32720

Title: V ( ) Delete  
Name: BOGGS, GREG  
Address: 968 PADDINGTON TERRACE  
City-St-Zip: LAKE MARY, FL 32746

Title: D ( ) Delete  
Name: MOGA, APRIL  
Address: 511 S LACY CIRCLE  
City-St-Zip: DELTONA, FL 32725

Title: D ( ) Delete  
Name: WARNER, CINDEE  
Address: 1223 W NEW YORK AVE  
City-St-Zip: DELAND, FL 32720

Title: T ( ) Delete  
Name: COKER, CHARLES  
Address: 1265 BRAMLEY LANE  
City-St-Zip: DELAND, FL 32720

Title: D ( ) Delete  
Name: VANAUKER, ROGER  
Address: 734 BRIARCLIFFE ROAD  
City-St-Zip: ORANGE CITY, FL 32763

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: DOW WARNER

P

04/08/2007

Electronic Signature of Signing Officer or Director

Date