## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000008344

Entity Name: EKKLESIA MINISTRIES, INCORPORATED

FILED Jan 11, 2007 Secretary of State

Ourself Daire deal Disease & Dustiness		Navy Deima	New Principal Place of Business:	
Current Principal Place of Business:		New Princ	ipai Place of Business:	
UNIT 1	LUMBUS DR			
TAMPA, FL	_ 33605			
Current Mailing Address:		New Maili	New Mailing Address:	
2914 E CO UNIT 1 TAMPA, FL	LUMBUS DR _ 33605			
FEI Number:	FEI Number Applied For ( )	FEI Number Not Appl	cable (X) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		Name and	Name and Address of New Registered Agent:	
UNIT 1	AJOR C II ILUMBUS DR _ 33605 US			
	named entity submits this statement for the pue of Florida.	urpose of changing it	s registered office or registered agent, or both,	
SIGNATUR	RE:			
	Electronic Signature of Registered Ager	nt	Date	
OFFICERS	S AND DIRECTORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CEO () Delete JONES, MAJOR C II 2914 E COLUMBUS DR - UNIT 1 TAMPA, FL 33605	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VSO () Delete PINNOCK, MICHELLE 10200 N ARMENIA AVE - APT 2503 TAMPA, FL 33612	Title: Name: Address: City-St-Zip:	BM (X) Change ( ) Addition MCFADDEN, TANESHA 1834 GREYSTONE HEIGHTS DR VALRICO, FL 33594	
Title: Name: Address: City-St-Zip:	T () Delete WILLIAMS, WENDELLE JR 707 DEBRA LYNNE DR BRANDON, FL 33619	Title: Name: Address: City-St-Zip:	T (X) Change ( ) Addition WILLIAMS, WENDELL JR 707 DEBRA LYNNE DR BRANDON, FL 33619	
Title: Name: Address: City-St-Zip:	T () Delete PINNOCK, NIGEL JR 10200 N ARMENIA AVE - APT 2503 TAMPA, FL 33612	Title: Name: Address: City-St-Zip:	S (X) Change ( ) Addition RICHARDSON, MISHANA 919 GOMILLION ST - APT D TAMPA, FL 33602	
Title: Name: Address: City-St-Zip:	T () Delete RICHARDSON, MISHANA 919 GOMILLION ST - APT D TAMPA, FL 33602	Title: Name: Address: City-St-Zip:	FM (X) Change ( ) Addition WILLIAMS, KEONA 707 DEBRA LYNNE DR BRANDON, FL 33619	
Title: Name: Address: City-St-Zip:	P (X) Delete WILLIAMS, KEONA 707 DEBRA LYNNE DR APT D BRANDON, FL 33619	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: TANESHA MCFADDEN BM 01/11/2007