2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008909

FILED Jul 16, 2007 Secretary of State

| Entity Nai | me: FEED MY SHEEP MINISTRY OF GOD, INC |), , | | |
|--|--|---|----------------------------------|--|
| Current Principal Place of Business: | | New Principal Place of Business: | New Principal Place of Business: | |
| 237 FAIRFIELD DR SANFORD, FL 32771 | | 4823 CAINS WREN TRAIL SANFORD, FL 32771 | | |
| Current Mailing Address: | | New Mailing Address: | New Mailing Address: | |
| 237 FAIRFIELD DR SANFORD, FL 32771 | | P.O. BOX 2581 SANFORD, FL 32772 | | |
| ln accordan | 71-1014338 FEI Number Applied For() For with s. 607.193(2)(b), F.S., the corporation did not re Address of Current Registered Agent: | | Status Desired (X) | |
| 420 MANC SANFORE | .D, PRESTON PR LN PR LN PR STORM STO | SCHOFIELD, PRESTON L CEO 4823 CAINS WREN TRAIL SANFORD, FL 32771 US sose of changing its registered office or registe | ered agent, or both, | |
| | e of Florida. | | G , , | |
| SIGNATURE: PRESTON L. SCHOFIELD | | 07/16/2 | 2007 | |
| | Electronic Signature of Registered Agent | Date | | |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | C () Delete IZQUIERDO, SYLVIA D 680 BROOKFIELD LOOP LAKE MARY, FL 32746 | Title: () Change () Add Name: Address: City-St-Zip: | ition | |
| Title: | | | | |
| Name: Address: | VC () Delete COOPER, CAROLYN 1197 GULF STAR DR P LAKE MARY, FL 32746 | Title: () Change () Add Name: Address: City-St-Zip: | ition | |
| Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: | COOPER, CAROLYN 1197 GULF STAR DR P | Name: Address: | | |
| Name: Address: City-St-Zip: Title: Name: Address: | COOPER, CAROLYN 1197 GULF STAR DR P LAKE MARY, FL 32746 S () Delete STARLING, JULIA 14104 STONE BROOK DR | Name: Address: City-St-Zip: Title: () Change () Add Name: Address: | ition | |

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: PRESTON L. SCHOFIELD CEO 07/16/2007