

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009179

FILED
Apr 08, 2010
Secretary of State

Entity Name: WITH HIS YOKE MINISTRY, INC.

Current Principal Place of Business:

4517 PARK ST
JACKSONVILLE, FL 32205

New Principal Place of Business:

Current Mailing Address:

4517 PARK ST
JACKSONVILLE, FL 32205

New Mailing Address:

FEI Number: 20-5646788

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HAMMOCK, LISBETH
4517 PARK ST
JACKSONVILLE, FL 32205 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: D
Name: HAMMOCK, LISBETH
Address: 4517 PARK ST
City-St-Zip: JACKSONVILLE, FL 32205

Title: D
Name: DRUMMOND, LARAE
Address: 5144 GLENWOOD
City-St-Zip: JACKSONVILLE, FL 32205

Title: D
Name: PATTERSON, TIM
Address: 1136 COPPER GATE PLACE
City-St-Zip: MACLENNY, FL 32063

Title: D
Name: BASS, GEORGE
Address: 3838 COLEBROOK DRIVE
City-St-Zip: JACKSONVILLE, F 32205

Title: D
Name: HAMMOCK, BETHANY
Address: 4517 PARK STREET
City-St-Zip: JACKSONVILLE, FL 32205

I hereby 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 all other like empowered.

SIGNATURE: LISBETH HAMMOCK

D

04/08/2010

Electronic Signature of Signing Officer or Director

Date