

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009514

FILED
Apr 27, 2007
Secretary of State

Entity Name: FISH HOUSE MINISTRIES, INC.

Current Principal Place of Business:

G-5 AQUA ISLES
LABELLE, FL 32935

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 453
FT. MYERS, FL 33902

New Mailing Address:

FEI Number: 20-5516930

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SKOLFIELD, ELLIS H
G-5 AQUA ISLES
LABELLE, FL 33935 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: PD () Delete
Name: SKOLFIELD, ELLIS H
Address: P.O. 453
City-St-Zip: FT. MYERS, FL 33902 US

Title: VPSD () Delete
Name: MARLATT, CRAIG S
Address: 8451 AMELIA TRAIL
City-St-Zip: KISSIMMEE, FL 34747 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DIR () Change (X) Addition
Name: MCDILDA, ARTHUR C
Address: 1089 BETHEL HAVEN LANE
City-St-Zip: MONISTA, VA 24121

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: CRAIG S. MARLATT

VPSD

04/27/2007

Electronic Signature of Signing Officer or Director

Date