

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012417

FILED
Aug 16, 2007
Secretary of State

Entity Name: FOOTPRINTS MINISTRY, INC.

Current Principal Place of Business:

2140 LONG BOW LANE
CLEARWATER, FL 33764

New Principal Place of Business:

Current Mailing Address:

2140 LONG BOW LANE
CLEARWATER, FL 33764

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GASSMAN, ALAN S
1245 COURT STREET
SUITE 201
CLEARWATER, FL 33756 US

Name and Address of New Registered Agent:

GASSMAN, ALAN S
1245 COURT STREET
SUITE 102
CLEARWATER, FL 33756 US

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:

08/16/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: AVERILL, FRANCIS J
Address: 2140 LONG BOW LANE
City-St-Zip: CLEARWATER, FL 33764

Title: D () Delete
Name: AVERILL, ROSE
Address: 2140 LONG BOW LANE
City-St-Zip: CLEARWATER, FL 33764

Title: D () Delete
Name: PAPUGA, LINDA
Address: 500 MERAVAN DRIVE
City-St-Zip: PALM HARBOR, FL 34683

Title: D () Delete
Name: HARRINGTON, ALYSON
Address: 11716 DERBYSHIRE DRIVE
City-St-Zip: TAMPA, FL 33626

Title: D () Delete
Name: MUDANO, THOMAS
Address: C/O 963 HIGHLAND AVENUE
City-St-Zip: DUNEDIN, FL 34698

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:

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: FRANCIS J. AVERILL

D

08/16/2007

Electronic Signature of Signing Officer or Director

Date