

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012430

FILED
Feb 08, 2009
Secretary of State

Entity Name: TRUTH & GRACE SPIRIT LED MINISTRIES INC.

Current Principal Place of Business:

143 MONACO DRIVE
DAVENPORT, FL 33837

New Principal Place of Business:

Current Mailing Address:

143 MONACO DRIVE
DAVENPORT, FL 33837

New Mailing Address:

FEI Number: 42-1717651

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCCORKLE, RAYMOND SR.
143 MONACO DRIVE
DAVENPORT, FL 33837 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 () Delete
Name: WILSON, CHRISTINE
Address: 10 CURTIN AVE
City-St-Zip: PITTSBURGH, PA 15210

Title: D () Delete
Name: EVANS, MARGARET
Address: 11777 OAK MANOR DRIVE
City-St-Zip: WALDORT, MD 20602

Title: D () Delete
Name: MCCORKLE, MARGARET
Address: 143 MONACO DR
City-St-Zip: DAVENPORT, FL 33837

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:

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: MARGARET MCCORKLE

D

02/08/2009

Electronic Signature of Signing Officer or Director

Date