

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012796

FILED
Mar 20, 2009
Secretary of State

Entity Name: DAWNING LIGHT MINISTRIES, INC.

Current Principal Place of Business:

5664 PADDOCK TRAIL DRIVE
TAMPA, FL 33624

New Principal Place of Business:

Current Mailing Address:

5664 PADDOCK TRAIL DRIVE
TAMPA, FL 33624

New Mailing Address:

FEI Number: 03-0611300

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIBBS, MICHAEL MR.
5664 PADDOCK TRAIL DRIVE
TAMPA, FL 33624 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: GIBBS, MICHAEL J
Address: 5664 PADDOCK TRAIL DRIVE
City-St-Zip: TAMPA, FL 33624

Title: VD () Delete
Name: IBBITSON, DON
Address: 15808 HOUND HORN LANE
City-St-Zip: TAMPA, FL 33624

Title: STD () Delete
Name: COLVIN, JULE C
Address: 3005 BARRET AVENUE
City-St-Zip: PLANT CITY, FL 33566

Title: D () Delete
Name: GIBBS, SUE
Address: 5664 PADDOCK TRAIL DRIVE
City-St-Zip: TAMPA, FL 33624

Title: D () Delete
Name: ROBERTS, GLEN
Address: 3819 BUCKINGHAM LOOP
City-St-Zip: VALRICO, FL 33594

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: SUE GIBBS

D

03/20/2009

Electronic Signature of Signing Officer or Director

Date