

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012884

FILED
Jan 21, 2009
Secretary of State

Entity Name: TLW MINISTRIES, INC.

Current Principal Place of Business:

2709 55TH STREET EAST
PALMETTO, FL 34221

New Principal Place of Business:

Current Mailing Address:

2709 55TH STREET EAST
PALMETTO, FL 34221

New Mailing Address:

FEI Number: 65-1299875

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, MELISSA
2709 55TH STREET EAST
PALMETTO, FL 34221 US

Name and Address of New Registered Agent:

WILLIAMS, MELISSA M CHRM
2709 55TH STREET EAST
PALMETTO, FL 34221 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: MELISSA M WILLIAMS

01/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CHRM () Delete
Name: WILLIAMS, MELISSA
Address: 2709 55TH ST E
City-St-Zip: PALMETTO, FL 34221

Title: PD () Delete
Name: WILLIAMS, MELISSA
Address: 239 KINGSLEY BLVD.
City-St-Zip: AUBURNDAL, FL 33823

Title: TD () Delete
Name: SIERRA, TARCIO
Address: P.O. BOX 336
City-St-Zip: ELLENTON, FL 34222

Title: SD () Delete
Name: KRUEGER, BETTY
Address: 1199 HWY 65
City-St-Zip: BRAHAM, MN 55006

Title: D () Delete
Name: WEGENER, MIRIAM
Address: 7521 DUPONT
City-St-Zip: RICHFIELD, MN 55423

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHRM (X) Change () Addition
Name: WILLIAMS, MELISSA M
Address: 2709 55TH ST E
City-St-Zip: PALMETTO, FL 34221 US

Title: PD (X) Change () Addition
Name: WILLIAMS, MELISSA M
Address: 2709 55TH ST E
City-St-Zip: PALMETTO, FL 34221 US

Title: TD (X) Change () Addition
Name: SIERRA, TARCIO
Address: P.O. BOX 336
City-St-Zip: ELLENTON, FL 34222 US

Title: SD (X) Change () Addition
Name: WEGENER, MIRIAM K
Address: 7521 DUPONT
City-St-Zip: RICHFIELD, MN 55423 US

Title: D (X) Change () Addition
Name: CRENSHAW, AVELINA
Address: PO BOX 547502
City-St-Zip: ORLANDO, FL 32854 US

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: MELISSA M WILLIAMS

CHRM

01/21/2009

Electronic Signature of Signing Officer or Director

Date