

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06053

FILED
Mar 27, 2007
Secretary of State

Entity Name: EXCHANGE MINISTRIES, INC.

Current Principal Place of Business:

1199 CLAY ST
WINTER PARK, FL 32789 US

New Principal Place of Business:

Current Mailing Address:

1199 CLAY ST
WINTER PARK, FL 32789 US

New Mailing Address:

FEI Number: 59-2501095 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WESTCOTT, JOHN J
1199 CLAY STREET
WINTER PARK, FL 32789 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: CHAMBERS, ALAN
Address: 332 FLEET RD
City-St-Zip: WINTER PARK, FL 32792

Title: D () Delete
Name: MYERS, BOB
Address: 10118 SHORTWOOD LANE
City-St-Zip: ORLANDO, FL 32836

Title: D () Delete
Name: SNELL, BILL
Address: 801 RUVBERBED BLVD
City-St-Zip: LONGWOOD, FL 32779

Title: D (X) Delete
Name: THOMPSON, RENE
Address: 8507 SURBAN DR
City-St-Zip: ORLANDO, FL 32829

Title: D () Delete
Name: WESTCOTT, JOHN J
Address: 321 MISTY MEADOW DR.
City-St-Zip: OCOEE, FL 34761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: GRIFFITH, RENE
Address: 6020 BENT PINE DRIVE APT 2744
City-St-Zip: ORLANDO, FL 32822

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

Title: D (X) Change () Addition
Name: WESTCOTT, JOHN J
Address: 1889 RACHELS RIDGE LOOP
City-St-Zip: OCOEE, FL 34761

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN J. WESTCOTT

_____ Electronic Signature of Signing Officer or Director

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03/27/2007

_____ Date