

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06053

FILED  
Jun 10, 2008  
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 ( )  
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:**

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: GRIFFITH, RENE  
Address: 6020 BENT PINE DRIVE APT 2744  
City-St-Zip: ORLANDO, FL 32822

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: SCHUMACHER, MARK  
Address: 850 ORANOLE RD.  
City-St-Zip: MAITLAND, FL 32751

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: JOHN J WESTCOTT

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

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06/10/2008

\_\_\_\_\_ Date