

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000074

FILED
Feb 19, 2009
Secretary of State

Entity Name: MARY P. THOMPSON MINISTRIES, INC.

Current Principal Place of Business:

6021 NW 6TH CT.
MIAMI, FL 33127

New Principal Place of Business:

6021 NW 6TH CT.
MIAMI, FL 33127 US

Current Mailing Address:

6021 NW 6TH CT.
MIAMI, FL 33127

New Mailing Address:

6021 NW 6TH CT.
MIAMI, FL 33127 US

FEI Number: 37-1536028

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, MARY P
6021 NW 6TH CT.
MIAMI, FL 33127 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: THOMPSON, MARY P
Address: 6033 NW 6TH CT.
City-St-Zip: MIAMI, FL 33127

Title: TD () Delete
Name: THOMPSON, EUGENE
Address: 6033 NW 6TH CT.
City-St-Zip: MIAMI, FL 33127

Title: SD () Delete
Name: CLAYTON, RUDOLPH
Address: 13851 SW 282ND ST.
City-St-Zip: HOMESTEAD, FL 33033

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: THOMPSON, MARY P
Address: 6033 NW 6TH CT.
City-St-Zip: MIAMI, FL 33127 US

Title: TD (X) Change () Addition
Name: THOMPSON, EUGENE
Address: 6033 NW 6TH CT.
City-St-Zip: MIAMI, FL 33127 US

Title: SD (X) Change () Addition
Name: CLAYTON, RUDOLPH
Address: 13851 SW 282ND ST.
City-St-Zip: HOMESTEAD, FL 33033 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: MARY P THOMPSON

PD

02/19/2009

Electronic Signature of Signing Officer or Director

Date