

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000200

FILED
Mar 20, 2011
Secretary of State

Entity Name: CARING AND SHARING MINISTRY INC.

Current Principal Place of Business:

809 N E ABREDEEN AVE
LAKE CITY, FL 32055

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 3382
LAKE CITY, FL 32056

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALLEN, GWENDOLYN D
809 N E ABREDEEN AVE
LAKE CITY, FL 32055 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: S
Name: ALSTON, WANDA L
Address: 708 N.W. WILSON ST
City-St-Zip: LAKE CITY, FL 32055

Title: P
Name: ALLEN, GWENDOLYN D
Address: 809 N E ABREDEEN AVE
City-St-Zip: LAKE CITY, FL 32055

Title: D
Name: JACKSON, VALENTINE
Address: 1728 N.W. MOORE ROAD
City-St-Zip: LAKE CITY, FL 32055

Title: D
Name: HENRY, AMIE L
Address: 1813 MISSISSIPPI AVE.
City-St-Zip: ALBANY, GA 31705

I hereby 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 all other like empowered.

SIGNATURE: GWENDOLYN D ALLEN

P

03/20/2011

Electronic Signature of Signing Officer or Director

Date