

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000750

FILED  
Mar 15, 2012  
Secretary of State

**Entity Name:** PLUS ONE MINISTRIES, INC.

**Current Principal Place of Business:**

901 W 19TH STREET  
PANAMA CITY, FL 32405

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 15665  
PANAMA CITY, FL 32406

**New Mailing Address:**

**FEI Number:** 30-0420754

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

POSTLEY, JOYCE D  
901 W 19TH STREET  
PANAMA CITY, FL 32405 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  
Name: POSTLEY, LEONARD B  
Address: 901 W 19TH STREET  
City-St-Zip: PANAMA CITY, FL 32405

Title: D  
Name: POSTLEY, JOYCE D  
Address: 901 W 19TH STREET  
City-St-Zip: PANAMA CITY, FL 32405

Title: D  
Name: JOHNSON, DOLORES  
Address: 7421 DOUGLAS BLVD STE N253  
City-St-Zip: DOUGLASVILLE, GA 30135

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: J. POSTLEY

D

03/15/2012

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

\_\_\_\_\_  
Date