

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000773

FILED  
Jan 31, 2009  
Secretary of State

Entity Name: JOHN & PRISCILLA RANGE MINISTRIES INTERNATIONAL, INC.

**Current Principal Place of Business:**

11 PERUVIAN LANE  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6042  
DAYTONA BEACH, FL 32122

**New Mailing Address:**

FEI Number: 75-3248050

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RANGE, JOHN T SR.  
11 PERUVIAN LANE  
ORMOND BEACH, FL 32174 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: P ( ) Delete  
Name: RANGE, JOHN T SR  
Address: P.O. BOX 6042  
City-St-Zip: DAYTONA BEACH, FL 32122

Title: VPT ( ) Delete  
Name: RANGE, PRISCILLA  
Address: P.O. BOX 6042  
City-St-Zip: DAYTONA BEACH, FL 32122

Title: D ( ) Delete  
Name: INGRAM, STEVEN J  
Address: 912 SEADUCK DRIVE  
City-St-Zip: DAYTONA BEACH, FL 32122

Title: D ( ) Delete  
Name: ADADEVOH, VERONICA  
Address: 16 OLD CANTON ROAD  
City-St-Zip: MARIETTA, GA 30068

Title: D ( ) Delete  
Name: NEWELL, KATHLEEN  
Address: 3413 COUNTRY MANOR DRIVE S.  
City-St-Zip: DAYTONA, FL 32119

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

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

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

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 T. RANGE SR.

P

01/31/2009

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

\_\_\_\_\_  
Date