## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000001025

Entity Name: SHARE THE GOSPEL, INC.

FILED Apr 20, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

13217 AUTOMOBILE BLVD CLEARWATER, FL 33762

Current Mailing Address: New Mailing Address:

13217 AUTOMOBILE BLVD CLEARWATER, FL 33762

FEI Number: 20-8232853 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

JONES, CYNTHIA D
13217 AUTOMOBILE BLVD
CLEARWATER, FL 33762 US
JONES, CYNTHIA D
13882 WHISPERWOOD DRIVE
CLEARWATER, FL 33762 US

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: CYNTHIA D. JONES 04/20/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PTD () Delete
 Title:
 PTD (X) Change () Addition

 Name:
 JONES, CYNTHIA D
 Name:
 JONES, CYNTHIA D

 Address:
 P.O. BOX 17272
 Address:
 13882 WHISPERWOOD DR.

 City-St-Zip:
 CLEARWATER, FL 33762
 City-St-Zip:
 CLEARWATER, FL 33762

Title: DS ( ) Delete Title: VPSD (X) Change ( ) Addition Name: PADLEY, KIMBERLY M Name: PADLEY, KIMBERLY M

Address: P.O. BOX 17272 Address: 13217 AUTOMOBILE BLVD.
City-St-Zip: CLEARWATER, FL 33762 City-St-Zip: CLEARWATER, FL 33762

 Title:
 D
 ( ) Delete
 Title:
 D
 (X) Change ( ) Addition

 Name:
 RICHARDSON, JEFFREY S
 Name:
 RICHARDSON, JEFFREY S

 Address:
 P.O. BOX 17272
 Address:
 935 LEESBURG STATION RD.

City-St-Zip: CLEARWATER, FL 33762 City-St-Zip: VOLANT, PA 33762

Title: ( ) Delete Title: D ( ) Change (X) Addition

Name:Name:WOODRUFF, SHAWNA LAddress:Address:13217 AUTOMOBILE BLVD.City-St-Zip:City-St-Zip:CLEARWATER, FL 33762

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: CYNTHIA D. JONES PTD 04/20/2009