

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001100

FILED  
Apr 08, 2009  
Secretary of State

Entity Name: V.L.ABNEY MINISTRIES INC.

## Current Principal Place of Business:

701 NORTH S STREET  
PENSACOLA, FL 32505

## New Principal Place of Business:

## Current Mailing Address:

701 NORTH S STREET  
PENSACOLA, FL 32505

## New Mailing Address:

FEI Number: 20-8362887

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ABNEY, VERNON  
2521 BOWLING GREEN WAY  
CANTONMENT, FL 32533 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: DP ( ) Delete  
Name: ABNEY, VERNON L  
Address: 2521 BOWLING GREEN WAY  
City-St-Zip: CANTONMENT, FL 32533

Title: VP ( ) Delete  
Name: ABNEY, AVA C  
Address: 2521 BOWLING GREEN WAY  
City-St-Zip: CANTONMENT, FL 32533

Title: D ( ) Delete  
Name: COMMODORE, ANTHONY W  
Address: 2521 BOWLING GREEN WAY  
City-St-Zip: CANTONMENT, FL 32533

Title: D ( ) Delete  
Name: WILLIAMS, RICKY  
Address: 10168 FOXRUN ROAD  
City-St-Zip: PENSACOLA, FL 32514

Title: D ( ) Delete  
Name: SAVAGE, LILLIE  
Address: 813 MAPLEWOOD CIRCLE  
City-St-Zip: PENSACOLA, FL 32534

Title: D ( ) Delete  
Name: SISTRUNK, KIM  
Address: 221 CRAFT ROAD  
City-St-Zip: PENSACOLA, FL 32534

## 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:

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: VERNON L. ABNEY

DP

04/08/2009

Electronic Signature of Signing Officer or Director

Date