

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003061

FILED
May 01, 2009
Secretary of State

Entity Name: SHALOM CHRISTIAN MINISTRIES, INC.

Current Principal Place of Business:

908 SW WILLISTON ROAD
GAINESVILLE, FL 32641

New Principal Place of Business:

Current Mailing Address:

628 NW 7TH AVENUE
GAINESVILLE, FL 32641

New Mailing Address:

FEI Number: 20-8716297 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GRAHAM, CLARA S
208 NE 46TH TERRACE
GAINESVILLE, FL 32641 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: WILLIAMS, DETROIT R
Address: 7407 NW 21ST COURT
City-St-Zip: GAINESVILLE, FL 32653

Title: D () Delete
Name: GRAHAM, CLARA S
Address: 208 NE 46TH TERRACE
City-St-Zip: GAINESVILLE, FL 32641

Title: D () Delete
Name: WELCOME, THEODORE L
Address: 9622 SW 33RD LANE
City-St-Zip: GAINESVILLE, FL 32608

Title: D () Delete
Name: WELCOME, FAYLENE
Address: 9622 SW 33RD LANE
City-St-Zip: GAINESVILLE, FL 32608

Title: D () Delete
Name: SINGLETON, JAMES
Address: 2403 NE 12TH STREET
City-St-Zip: GAINESVILLE, FL 32609

Title: D () Delete
Name: HAGLEY, YOLANDA
Address: 133 NW 84TH STREET
City-St-Zip: GAINESVILLE, FL 32607

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: DETROIT R. WILLIAMS

CEO

05/01/2009

Electronic Signature of Signing Officer or Director

Date