

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004006

FILED
Jul 11, 2008
Secretary of State

Entity Name: WALK BY FAITH MINISTRIES, INCORPORATED

Current Principal Place of Business:

13113 LAKE BUTLER BLVD
WINDERMERE, FL 34786

New Principal Place of Business:

815 E. HARBOUR CT.
OCOE, FL 34761

Current Mailing Address:

13113 LAKE BUTLER BLVD
WINDERMERE, FL 34786

New Mailing Address:

815 E. HARBOUR CT.
OCOE, FL 34761

FEI Number: 38-3777033

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:

SAVAGE, SHARON J
13113 LAKE BUTLER BLVD
WINDERMERE, FL 34786 US

Name and Address of New Registered Agent:

SAVAGE, EARL L
815 E. HARBOUR CT.
OCOE, FL 34761 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: EARL L. SAVAGE

07/11/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PSP () Delete
Name: SAVAGE, EARL L SR
Address: 13113 LAKE BUTLER BLVD
City-St-Zip: WINDERMERE, FL 34786

Title: VAP () Delete
Name: SAVAGE, SHARON J
Address: 13113 LAKE BUTLER BLVD
City-St-Zip: WINDERMERE, FL 34786

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSP (X) Change () Addition
Name: SAVAGE, EARL L SR
Address: 815 E. HARBOUR CT.
City-St-Zip: OCOE, FL 34761

Title: VAP (X) Change () Addition
Name: SAVAGE, SHARON J
Address: 815 E. HARBOUR CT.
City-St-Zip: WINDERMERE, FL 34761

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: EARL L. SAVAGE

PSP

07/11/2008

Electronic Signature of Signing Officer or Director

Date