

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004090

Entity Name: SAND MINISTRY, INC.

FILED
Mar 22, 2009
Secretary of State

Current Principal Place of Business:

1640 PATLIN CIRCLE SOUTH
LARGO, FL 33770

New Principal Place of Business:

Current Mailing Address:

1640 PATLIN CIRCLE SOUTH
LARGO, FL 33770

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, MELISSA
1455 OAK VILLAGE DRIVE
LARGO, FL 33778 US

Name and Address of New Registered Agent:

NOON, DAVID
1640 PATLIN CIRCLE SOUTH
LARGO, FL 33770 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: DAVID L NOON

03/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NOON, DAVID
Address: 1640 PATLIN CIRCLE SOUTH
City-St-Zip: LARGO, FL 33770

Title: VP () Delete
Name: NOON, SHERRY
Address: 1640 PATLIN CIRCLE SOUTH
City-St-Zip: LARGO, FL 33770

Title: S () Delete
Name: COLEMAN, MELISSA
Address: 1455 OAK VILLAGE DRIVE
City-St-Zip: LARGO, FL 33778

Title: T () Delete
Name: ROBERSON, RUTH
Address: 1701 HARBOR DRIVE
City-St-Zip: CLEARWATER, FL 33755

Title: FS () Delete
Name: MCCASKILL, MALACHI
Address: 1544 CROSBY STREET
City-St-Zip: LARGO, FL 33778

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: NOON, SHERRY L
Address: 1640 PATLIN CIRCLE SOUTH
City-St-Zip: LARGO, FL 33770

Title: T (X) Change () Addition
Name: NOON, MIRIAM J
Address: 1820 PATLIN CIRCLE S
City-St-Zip: LARGO, FL 33770

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: DAVID L. NOON

PRES

03/22/2009

Electronic Signature of Signing Officer or Director

Date