

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004108

FILED
Apr 30, 2008
Secretary of State

Entity Name: THE HOMESTEAD MINISTRIES, INC.

Current Principal Place of Business:

519 WHITEHOUSE ROAD
MONTICELLO, FL 32344

New Principal Place of Business:

Current Mailing Address:

PO BOX 425
LLOYD, FL 32337

New Mailing Address:

FEI Number: 30-0418020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINCHESTER, MARK
409 WHITEHOUSE ROAD
MONTICELLO, FL 32344 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: D () Delete
Name: DUNCAN, MARTY REV.
Address: 40 COOPER ROAD
City-St-Zip: MONTICELLO, FL 32344

Title: D () Delete
Name: FOUNTAIN, GRAHAM
Address: 2809 WHITTINGTON DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: GOFF, LEN DR.
Address: 4731 BUCK LAKE RD
City-St-Zip: TALLAHASSEE, FL 32317

Title: D () Delete
Name: SCOTT, JAMES DR.
Address: PO BOX 7630
City-St-Zip: TIFTON, GA 31793

Title: V () Delete
Name: WINCHESTER, MARCUS
Address: 2007 DUCK COVE RD
City-St-Zip: TALLAHASSEE, FL 32344

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HENDRIX, JERRY
Address: 2329 KILLEARNY WAY
City-St-Zip: TALLAHASSEE, FL 32309

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: MARK WINCHESTER

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date