

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005497

FILED
Feb 16, 2009
Secretary of State

Entity Name: GOD WORKS!, INC.

Current Principal Place of Business:

9815 REYLINDA AVE
THONOTOSASSA, FL 33592

New Principal Place of Business:

Current Mailing Address:

9815 REYLINDA AVE
THONOTOSASSA, FL 33592

New Mailing Address:

FEI Number: 28-0301289

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CALDWELL, JOHANNA M
9815 REYLINDA AVE
THONOTOSASSA, FL 33592 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: CALDWELL, JOHANNA M
Address: 9815 REYLINDA AVE
City-St-Zip: THONOTOSASSA, FL 33592

Title: DVT () Delete
Name: CALDWELL, PHILLIPE E
Address: 9815 REYLINDA AVE
City-St-Zip: THONOTOSASSA, FL 33592

Title: DS () Delete
Name: ROMAN, DAVID
Address: 9815 REYLINDA AVE
City-St-Zip: THONOTOSASSA, FL 33592

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DS (X) Change () Addition
Name: LEONARD, KEITH DIRECT
Address: 9815 REYLINDA AVE
City-St-Zip: THONOTOSASSA, FL 33592

Title: DS () Change (X) Addition
Name: SEARS, JAIME L DIRECT.
Address: 9815 REYLINDA AVE.
City-St-Zip: THONOTOSASSA, FL 33592

Title: DS () Change (X) Addition
Name: HALE, JAMES R DIRECT
Address: 9815 REYLINDA AVE
City-St-Zip: THONOTOSASSA, FL 33592

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: JOHANNA M CALDWELL

DP

02/16/2009

Electronic Signature of Signing Officer or Director

Date