2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2008
Secretary of State

DOCUMENT# N07000006015

Entity Name: WHEAT & HONEY MINISTRIES INTERNATIONAL, INC.

Current Principal Place of Business:

149 SE VICKERS TERR
LAKE CITY, FL 32025

New Principal Place of Business:

Current Mailing Address:

149 SE VICKERS TERR
LAKE CITY, FL 32025

New Mailing Address:

FEI Number: 37-1539575 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARTER, PEGGY B
127 SE CO RD 252
LAKE CITY, FL 32025 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: LEYDA, TONI M
Address: 149 SE VICKERS TERR
City-St-Zip: LAKE CITY, FL 32025

Title: D ( ) Delete
Name: RUSSELL, LAURA A
Address: 1676 SE FAMILY RD
City-St-Zip: LULU, FL 32061

Title: D ( ) Delete
Name: CARTER, PEGGY B
Address: 127 SE CO RD 252
City-St-Zip: LAKE CITY, FL 32025

Title: D ( ) Delete
Name: SGANGA ESG, BRIAN J
Address: PO BOX 2649
City-St-Zip: LAKE CITY, FL 32056

Title: D ( ) Delete
Name: FARRIS, PAUL M
Address: PO BOX 7004
City-St-Zip: LAKE CITY, FL 32055

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:

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: TONI MASON LEYDA D 01/05/2008

Electronic Signature of Signing Officer or Director — Date