2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 03, 2008
Secretary of State

DOCUMENT# N07000007084

Entity Name: SOUL BAIT MINISTRIES, INC

Current Principal Place of Business:

3264 ACE LN
JACKSONVILLE, FL 32277 US

New Principal Place of Business:

Current Mailing Address:

3264 ACE LN
JACKSONVILLE, FL 32277 US

New Mailing Address:

FEI Number: 26-0607167 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LATHROP, SCOTT A
3264 ACE LN
JACKSONVILLE, FL 32277 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: P ( ) Delete
Name: LATHROP, SCOTT A
Address: 3264 ACE LN
City-St-Zip: JACKSONVILLE, FL 32277

Title: VP ( ) Delete
Name: CAMPBELL, CHARLIE
Address: 3405 SARA DR
City-St-Zip: JACKSONVILLE, FL 32277

Title: SEC ( ) Delete
Name: MOORE, ALBERT F
Address: 608 BLUFF POINTE
City-St-Zip: COLUMBIA, SC 29212

Title: TREA ( ) Delete
Name: PETREE, JONATHAN R
Address: 709 NEPTUNE LN
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: VP ( ) Delete
Name: SORCHY, PAUL C II
Address: 17805 BONNIEVISTA CT
City-St-Zip: WINTER GARDEN, FL 34787

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: VP (X) Change ( ) Addition
Name: MOORE, ALBERT F
Address: 608 BLUFF POINTE
City-St-Zip: COLUMBIA, SC 29212

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

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

Title: SEC ( ) Change (X) Addition
Name: LATHROP, JENNIFER J
Address: 3264 ACE LN
City-St-Zip: JACKSONVILLE, FL 32277

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: SCOTT A LATHROP PRES 01/03/2008

Electronic Signature of Signing Officer or Director — Date