

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007765

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: A WORK IN PROGRESS MINISTRIES, INC.

## Current Principal Place of Business:

9838 OLD BAYMEADOWS ROAD  
#154  
JACKSONVILLE, FL 32256 US

## New Principal Place of Business:

## Current Mailing Address:

9838 OLD BAYMEADOWS ROAD  
#154  
JACKSONVILLE, FL 32256 US

## New Mailing Address:

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

## Name and Address of Current Registered Agent:

DARRELL, LISA M  
9838 OLD BAYMEADOWS ROAD SUITE 154  
JACKSONVILLE, FL 32256 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: S ( ) Delete  
Name: MARTIN, GEORGIA R  
Address: 264 EAST CHURCH STREET  
City-St-Zip: SOMERSET, PA 15501

Title: P ( ) Delete  
Name: DARRELL, LISA  
Address: 14558 CHERRY LAKE DRIVE W  
City-St-Zip: JACKSONVILLE, FL 32258

Title: T ( ) Delete  
Name: PAYNE, HERBERT B  
Address: 7213 BEACON HILL DR  
City-St-Zip: PITTSBURGH, PA 15221

Title: D (X) Delete  
Name: MCDONALD, LINDA  
Address: 9838 OLD BAYMEADOWS ROAD #154  
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: D (X) Delete  
Name: SMITH, FRANCIS L  
Address: 9838 OLD BAYMEADOWS ROAD #154  
City-St-Zip: JACKSONVILLE, FL 32256 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change ( ) Addition  
Name: MARTIN, GEORGIA R  
Address: 9838 OLD BAYMEADOWS ROAD #154  
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: P (X) Change ( ) Addition  
Name: DARRELL, LISA  
Address: 14558 CHERRY LAKE DRIVE W  
City-St-Zip: JACKSONVILLE, FL 32258 US

Title: T (X) Change ( ) Addition  
Name: PAYNE, HERBERT B  
Address: 7213 BEACON HILL DR  
City-St-Zip: PITTSBURGH, PA 15221 US

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: LISA M. DARRELL

PRES

04/29/2009

Electronic Signature of Signing Officer or Director

Date