

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008137

Entity Name: SHINE MINISTRIES, INC.

FILED
May 02, 2008
Secretary of State

Current Principal Place of Business:

2710 NW 48TH STREET
TAMARAC, FL 33309

New Principal Place of Business:

Current Mailing Address:

2710 NW 48TH STREET
TAMARAC, FL 33309

New Mailing Address:

FEI Number: 26-0721519 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

OWEN, JAYESON B
2710 NW 48TH STREET
TAMARAC, FL 33309 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: OWEN, JAYESON B
Address: 2710 NW 48TH STREET
City-St-Zip: TAMARAC, FL 33309 US

Title: VP () Delete
Name: BAILEY, CHRISTOPHER M
Address: 2710 NW 48TH STREET
City-St-Zip: TAMARAC, FL 33309 US

Title: S () Delete
Name: LUGO, MICHELLE
Address: 1172 NW 184 WAY
City-St-Zip: PEMBROKE PINES, FL 33029

Title: T () Delete
Name: SANCHEZ, ELAINE
Address: 1172 NW 184TH WAY
City-St-Zip: PEMBROKE PINES, FL 33029

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: OWEN, JAYESON B
Address: 2710 NW 48TH STREET
City-St-Zip: TAMARAC, FL 33309 US

Title: C/D (X) Change () Addition
Name: BAILEY, CHRISTOPHER M
Address: 2710 NW 48TH STREET
City-St-Zip: TAMARAC, FL 33309 US

Title: S/D (X) Change () Addition
Name: LUGO, MICHELLE
Address: 1172 NW 184 WAY
City-St-Zip: PEMBROKE PINES, FL 33029

Title: T/D (X) Change () Addition
Name: SANCHEZ, ELAINE
Address: 1172 NW 184TH WAY
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VP/D () Change (X) Addition
Name: HENRY, TIMOTHY S II
Address: P.O. BOX 156
City-St-Zip: DEERFIELD BEACH, FL 33443

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: CHRISTOPHER MITCHELL BAILEY

C/D

05/02/2008

Electronic Signature of Signing Officer or Director

Date