

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008751

FILED
May 01, 2009
Secretary of State

Entity Name: WANDA BRUCE MINISTRIES INC.

Current Principal Place of Business:

141 LANDMARK STREET
DELTONA, FL 32725

New Principal Place of Business:

Current Mailing Address:

PO BOX 6512
DELTONA, FL 32728

New Mailing Address:

FEI Number: 65-1318582 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

BRUCE, WANDA
141 LANDMARK STREET
DELTONA, FL 32725 US

Name and Address of New Registered Agent:

BRUCE, WANDA
141 LANDMARK STREET
A
DELTONA, FL 32725 US

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: _____

05/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: BRUCE, WANDA L
Address: PO BOX 6512
City-St-Zip: DELTONA, FL 32728 US

Title: DVA () Delete
Name: FITCH, PAMELA C
Address: 406 WOODFARE LANE
City-St-Zip: KENNESAW, GA 30152 US

Title: DVT () Delete
Name: OATIS, MAMMIE
Address: 1060 KENNEDY ROAD
City-St-Zip: DAYTONA BEACH, FL 32117 US

Title: DVS () Delete
Name: COX, MARY
Address: 944 EMBASSEY DRIVE
City-St-Zip: DELTONA, FL 32725 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVA (X) Change () Addition
Name: GRIFFIN, FREDRICK
Address: 1760 COFIELD DRIVE
City-St-Zip: DELTONA, FL 32725 US

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

Title: DVS (X) Change () Addition
Name: WALKER, TIMOTHY M
Address: 141A LANDMARK STREET
City-St-Zip: DELTONA, FL 32728 US

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: WANDA L. BRUCE

DPST

05/01/2009

Electronic Signature of Signing Officer or Director

Date