2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008751

FILED May 01, 2012 Secretary of State

Entity Name: WANDA BRUCE MINISTRIES INC.

Current Principal Place of Business: New Principal Place of Business:

319 MEDFORD AVE 1354 SKYLARK CT.

DELTONA, FL 32725 DELTONA, FL 32725 US

Current Mailing Address: New Mailing Address:

PO BOX 6512 PO BOX 6512

DELTONA, FL 32728 DELTONA, FL 32728 US

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BRUCE, WANDA BRUCE, WANDA L 319 MEDFORD AVE 1354 SKYLARK CT. DELTONA, FL 32725 DELTONA, FL 32725 US 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: WANDA L. BRUCE 05/01/2012

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

PST

BRUCE, WANDA L Name: Address: PO BOX 6512

City-St-Zip: DELTONA, FL 32728 US

Title:

Name: TYLER, BRUCE M Address: PO BOX 6512

DELTONA, FL 32728 US City-St-Zip:

Title: DIR

OATIS, MAMMIE Name: 1060 KENNEDY ROAD Address:

City-St-Zip: DAYTONA BEACH, FL 32117 US

Title: DIR

Name: WALKER, TIMOTHY M PO BOX 6512 Address: City-St-Zip: DELTONA, FL 32728 US

Title:

THEODORE, WALKER M III Name:

PO BOX 6512 Address:

DELTONA, FL 32728 US City-St-Zip:

Title:

RUSH, SHEILA Name: Address: 432 CLARK STREET ORANGE CITY, FL 32763 US City-St-Zip:

I hereby 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 all other like empowered.

PST SIGNATURE: WANDA L. BRUCE 05/01/2012