2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009506

FILED Jan 16, 2010 Secretary of State

Date

Entity Name: DR. WILLIAM J. MCCORKLE MIINSTRIES INC.

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

822 HIGHPOINT DRIVE 822 HIGHPOINT DRIVE

PORT ORANGE, FL 32127 PORT ORANGE, FL 32127 US

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 290475 822 HIGHPOINT DRIVE

PORT ORANGE, FL 32129 PORT ORANGE, FL 32127 US

FEI Number: 30-0449434 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:

DEBONIS, PAUL DEBONIS, PAUL P PAUL DE 822 HIGHPOINT DRIVE 822 HIGHPOINT DRIVE

PORT ORANGE, FL 32127 US SUITE 1400

Electronic Signature of Registered Agent

PORT ORANGE, FL 32127 US

in the State of Florida.

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

SIGNATURE: PAUL DEBONIS 01/16/2010

OFFICERS AND DIRECTORS:

Title: PRES

Name: MCCORKLE, WILLIAM J DR.
Address: 461 BLACK KNIGHT WAY
City-St-Zip: LONGWOOD, FL 32779

Title: VP

 Name:
 VARGA, ALEXANDER P PAUL DE

 Address:
 2032 COURTYARD LOOP #100

 City-St-Zip:
 SANFORD, FL 32771 US

Title: ST

 Name:
 DEBONIS, PAUL S PAUL DE

 Address:
 822 HIGHPOINT DRIVE

 City-St-Zip:
 PORT ORANGE, FL 32127 US

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.

SIGNATURE: PAUL DEBONIS DIR 01/16/2010