

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009831

Entity Name: ZENON MINISTRIES, INC.

FILED
Jan 16, 2009
Secretary of State

Current Principal Place of Business:

2823 LAKE SAXON DRIVE
LAND O' LAKES, FL 34639

New Principal Place of Business:

Current Mailing Address:

2823 LAKE SAXON DRIVE
LAND O' LAKES, FL 34639

New Mailing Address:

FEI Number: 26-1231679

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORMAN, CHRISTOPHER H
315 HYDE PARK AVE
TAMPA, FL 33606 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: D () Delete
Name: ANDRUSYSHYN, ZENON
Address: 2823 LAKE SAXON DRIVE
City-St-Zip: LAND O' LAKES, FL 34639

Title: D () Delete
Name: ANDRUSYSHYN, SUSAN Y
Address: 2823 LAKE SAXON DRIVE
City-St-Zip: LAND O' LAKES, FL 34639

Title: D () Delete
Name: OVERTON, STEVE
Address: 3121 LAKESTONE DRIVE
City-St-Zip: TAMPA, FL 33618

Title: D () Delete
Name: LUND, JOHN
Address: 84707 N FRANKLIN STREET
City-St-Zip: TAMPA, FL 33602

Title: D () Delete
Name: SMITH, JAMES O
Address: 10531 HOMESTEAD DRIVE
City-St-Zip: TAMPA, FL 33618

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: ZENON ANDRUSYSHYN

MR.

01/16/2009

Electronic Signature of Signing Officer or Director

Date