

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010872

FILED
Jul 10, 2009
Secretary of State

Entity Name: SHERMAN OWENS MINISTRIES, INC.

Current Principal Place of Business:

6512 93RD STREET EAST
BRADENTON, FL 34202

New Principal Place of Business:

Current Mailing Address:

6512 93RD STREET EAST
BRADENTON, FL 34202

New Mailing Address:

FEI Number: 26-1612204 **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:

Name and Address of New Registered Agent:

OWENS, MARY
6512 93RD STREET EAST
BRADENTON, FL 34202 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: REV () Delete
Name: WOLMARAN, THEO
Address: 3607 NORTH LOOP RD.-1604
City-St-Zip: SAN ANTONIO, TX 78247

Title: D () Delete
Name: OWENS, MARY
Address: 6512 93RD STREET EAST
City-St-Zip: BRADENTON, FL 34202

Title: D () Delete
Name: HODGE, FRED DR
Address: 9200 OWENS MOUTH AVE
City-St-Zip: CHATSWORTH, CA 91311

Title: D () Delete
Name: ZIRKLE WRIGHT, MARION PASTOR
Address: PO BOX 1190
City-St-Zip: CADDO MILLS, TX 75135

Title: D () Delete
Name: WRIGHT, CLARENCE REV
Address: PO BOX 1190
City-St-Zip: CADDO MILLS, FL 75135

Title: D () Delete
Name: PROBST, MARYBETH PASTOR
Address: 6512 93RD STREET EAST
City-St-Zip: BRADENTON, FL 34202

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:

Title: D (X) Change () Addition
Name: JENNIFER, CHRISTMAN SEC
Address: 4716 SAN JOSE DR
City-St-Zip: SARASOTA, FL 34235

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: MARY OWENS

PSTR

07/10/2009

Electronic Signature of Signing Officer or Director

Date