

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07319

FILED
Jan 06, 2009
Secretary of State

Entity Name: EAGLES WAY MINISTRIES, INC.

Current Principal Place of Business:

6816 A AVENUE
ST AUGUSTINE, FL 32084 US

New Principal Place of Business:

Current Mailing Address:

18 DORSEY FORD ROAD
RAYVILLE, LA 71269 US

New Mailing Address:

FEI Number: 59-2495090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CONNER, BONNIE W
6816 A AVENUE
ST AUGUSTINE, FL 32084 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: PD () Delete
Name: JONES, BEVERLY
Address: 1500 MCKEEN PLAZA DR., APT. 123
City-St-Zip: MONROE, LA 71203

Title: VD () Delete
Name: NANCE, DIANNE
Address: 306 TIMBERLAND DR
City-St-Zip: MONROE, LA 71203

Title: ST () Delete
Name: BRIDGES, DOLLY,
Address: 20 DORSEY FORD RD
City-St-Zip: RAYVILLE, LA 71269

Title: D () Delete
Name: KELLER, AGNES,
Address: 108 WALKER STREET
City-St-Zip: NEWELLTON, LA 71353

Title: D () Delete
Name: BRIDGES, LATEN
Address: 20 DORSEY FORD RD
City-St-Zip: RAYVILLE, LA 71269

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JONES, BEVERLY
Address: 22 DORSEY FORD
City-St-Zip: RAYVILLE, LA 71269

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: DOLLY BRIDGES

ST

01/06/2009

Electronic Signature of Signing Officer or Director

Date