

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07319

**FILED**  
**Jan 22, 2010**  
**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  
Name: JONES, BEVERLY  
Address: 22 DORSEY FORD  
City-St-Zip: RAYVILLE, LA 71269

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

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

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

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

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: DOLLY BRIDGES

ST

01/22/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date