

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07905

FILED
Apr 08, 2009
Secretary of State

Entity Name: SHARING TIME MINISTRIES, INC.

Current Principal Place of Business:

1129 RIVER BRICK RD.
JACKSONVILLE, FL 32259

New Principal Place of Business:

1129 RIVER BIRCH RD.
JACKSONVILLE, FL 32259 US

Current Mailing Address:

P O BOX 23626
JACKSONVILLE, FL 322413626

New Mailing Address:

P O BOX 23626
JACKSONVILLE, FL 32241 US

FEI Number: 59-2775989

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAGBY, CHARLES
1129 RIVER BRICK RD.
JACKSONVILLE, FL 32259 US

Name and Address of New Registered Agent:

BAGBY, CHARLES W
1129 RIVER BIRCH RD.
JACKSONVILLE, FL 32259 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: CHARLES W. BAGBY

04/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BOYLES, STELLA H.
Address: 732 CHARMWOOD DR.
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: VD () Delete
Name: BAGBY, CHARLES W
Address: 1129 RIVER BIRCH RD
City-St-Zip: JACKSONVILLE, FL 32259

Title: STD () Delete
Name: WILES, LEONA M
Address: 732 CHARMWOOD DR.
City-St-Zip: SAINT AUGUSTINE, FL 32086

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BOYLES, STELLA H.
Address: 4141 HWY. 15 SOUTH
City-St-Zip: OXFORD, NC 27565 US

Title: VD (X) Change () Addition
Name: BAGBY, CHARLES W
Address: 1129 RIVER BIRCH RD
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: STD (X) Change () Addition
Name: WILES, LEONA M
Address: 4141 HWY. 15 SOUTH
City-St-Zip: OXFORD, NC 27565 US

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: STELLA H. BOYLES

PD

04/08/2009

Electronic Signature of Signing Officer or Director

Date