## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000002600

Entity Name: JOHN THOMPSON MINISTRIES, INC.

FILED Apr 28, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2945 WOODRICH DRIVE 2945 WOODRICH DRIVE

SUITE C APT C

TALLAHASSEE, FL 32301 TALLAHASSEE, FL 32301

**Current Mailing Address: New Mailing Address:** 

2945 WOODRICH DRIVE 2945 WOODRICH DRIVE APT C

SUITE C TALLAHASSEE, FL 32301

TALLAHASSEE, FL 32301

FEI Number: 26-2178406 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

THOMPSON, JOHN L THOMPSON, JOHN L 2945 WOODRICH DRIVE 2945 WOODRICH DRIVE

SUITE C APT C

TALLAHASSEE, FL 32301 US TALLAHASSEE, FL 32301 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: JOHN L. THOMPSON 04/28/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete (X) Change ( ) Addition

THOMPSON, JOHN L THOMPSON, JOHN L Name: Name: 2945 WOODRICH DRIVE SUITE C. Address: 2945 WOODRICH DRIVE. APT C. Address:

City-St-Zip: TALLAHASSEE,, FL 32301 US City-St-Zip: TALLAHASSEE,, FL 32301 US

(X) Change ( ) Addition Title: SEC () Delete Title: THOMPSON, RETHA D THOMPSON, RETHA Name: Name:

Address: 2945 WOODRICH DRIVE, SUITE C. Address: 2945 WOODRICH DRIVE, APT C City-St-Zip: TALLAHASSEE, FL 32301 US City-St-Zip: TALLAHASSEE, FL 32301 US

Title: () Delete Title: (X) Change ( ) Addition

WHITE, KEVIN C THOMPSON, JOHN A Name: Name: 8006 ABBEY MIST COVE 2945 WOODRICH DR APT C Address: Address: City-St-Zip: TAMPA, FL 33619 US City-St-Zip: TALLAHASSEE, FL 32301 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: JOHN L. THOMPSON Ρ 04/28/2009