2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002959

Entity Name: BRUCE MINISTRIES INC.

FILED Aug 31, 2009 Secretary of State

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

1581 LONNIE ROAD 3909 RESERVE DRIVE

TALLAHASSEE, FL 32308 2716

TALLAHASSEE, FL 32311

Current Mailing Address: New Mailing Address:

1581 LONNIE ROAD 3909 RESERVE DRIVE TALLAHASSEE, FL 32308 2716

TALLAHASSEE, FL 32311

FEI Number: 56-1908561 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:

BRUCE, VICTORIA BRUCE, VICTORIA A 1581 LONNIE ROAD 3909 RESERVE DRIVE

TALLAHASSEE, FL 32308 US 2716
TALLAHASSEE, FL 32311 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: VICTORIA A. BRUCE 08/31/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 BRUCE, VICTORIA
 Name:
 BRUCE, VICTORIA

 Address:
 1581 LONNIE ROAD
 Address:
 3909 RESERVE DRIVE, 2716

 City-St-Zip:
 TALLAHASSEE, FL 32308
 City-St-Zip:
 TALLAHASSEE, FL 32311

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

Name:BRUCE, THADDEUSName:BRUCE, THADDEUSAddress:1581 LONNIE ROADAddress:3909 RESERVE DRIVE, 2716City-St-Zip:TALLAHASSEE, FL 32308City-St-Zip:TALLAHASSEE, FL 32311

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: VICTORIA A. BRUCE PRES 08/31/2009