2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2009
Secretary of State

DOCUMENT# N08000003806

Entity Name: BEACHSIDE MINISTRIES, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
127-C BEACH DRIVE FORT WALTON BEACH, FL 32547	

Current Mailing Address:	**New Mailing Address:**
127-C BEACH DRIVE FORT WALTON BEACH, FL 32547	

FEI Number: 51-0674478   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
ELLIS, SHAUN 127-C BEACH DRIVE FORT WALTON BEACH, FL 32547 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: _____

            Electronic Signature of Registered Agent   Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS	ADDITIONS/CHANGES
Title: P ( ) Delete Name: ELLIS, SHAUN TRUSTEE Address: 127-C BEACH DRIVE City-St-Zip: FORT WALTON BEACH, FL 32547	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: VP ( ) Delete Name: PALMER, THOMAS JEFFERY TRUSTEE Address: 904 SHARON POINT CIRCLE City-St-Zip: FORT WALTON BEACH, FL 32547	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: S ( ) Delete Name: BARKER, GENE TRUSTEE Address: 908 WOODBRIAR CIRCLE City-St-Zip: FORT WALTON BEACH, FL 32547	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: T ( ) Delete Name: BENNETT, JR., ROBERT E TRUSTEE Address: 628-D MOONEY ROAD City-St-Zip: FORT WALTON BEACH, FL 32547	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: SHAUN ELLIS   MR   01/13/2009

            Electronic Signature of Signing Officer or Director   Date