2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010520

Entity Name: FILL MY CUP MINISTRIES, INC.

FILED Apr 29, 2010 Secretary of State

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

11051 BARBIZON CIRCLE WEST JACKSONVILLE, FL 32257

Current Mailing Address: New Mailing Address:

11051 BARBIZON CIRCLE WEST JACKSONVILLE, FL 32257

FEI Number: 94-3454369 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:

THOMAS, CASSUNDREA L 11051 BARBIZON CIRCLE WEST JACKSONVILLE, FL 32257 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:

Title: I

Name: THOMAS, ISAAC L SR

Address: 11051 BARBIZON CIRCLE WEST City-St-Zip: JACKSONVILLE, FL 32257

Title: ∨

Name: THOMAS, CASSUNDREA L
Address: 11051 BARBIZON CIRCLE WEST
City-St-Zip: JACKSONVILLE, FL 32257

Title:

Name: TAYLOR, SAUNDRETTE Address: 3701 SKYVIEW ROAD City-St-Zip: MARIANNA, FL 32246

Title: 5

Name: BRYANT, JOSEPHINE

Address: 14543 CHERRY LAKE DRIVE EAST

City-St-Zip: JACKSONVILLE, FL 32258

Title: [

 Name:
 DAVIS, DEBORA A

 Address:
 1340 GROTHE STREET

 City-St-Zip:
 JACKSONVILLE, FL 32209

Title: [

Name: CANADY, ADRIAN
Address: 520 HARVICK CIRCLE
City-St-Zip: STOCKBRIDGE, GA 30281

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: CASSUNDREA L. THOMAS V 04/29/2010