

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000011380

FILED  
Apr 25, 2012  
Secretary of State

**Entity Name:** IN HIS GRIP MINISTRIES INC.

**Current Principal Place of Business:**

140 EL PRADO CT  
PALATKA, FL 32177

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 562  
BOSTWICK, FL 32007

**New Mailing Address:**

**FEI Number:** 80-0318488

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLYMER, TROY  
140 EL PRADO CT  
PALATKA, FL 32177 US

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

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: P  
Name: CLYMER, TROY  
Address: 140 EL PRADO CT  
City-St-Zip: PALATKA, FL 32177

Title: VP  
Name: CLYMER, WANDA  
Address: 140 EL PARADO CT  
City-St-Zip: PALATKA, FL 32177

Title: VP  
Name: SMITH, DERRICK  
Address: 6155 HWY 17 S  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

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: TROY CLYMER

P

04/25/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date