

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000002908

FILED  
May 01, 2012  
Secretary of State

**Entity Name:** BAREFOOT PROPHET & LADY BAREFOOT LOVESHIP REVIVAL MINISTRIES INC.

**Current Principal Place of Business:**

3915 ROSEWOOD WAY  
ORLANDO, FL 32808 US

**New Principal Place of Business:**

**Current Mailing Address:**

3915 ROSEWOOD WAY  
ORLANDO, FL 32808 US

**New Mailing Address:**

**FEI Number:** 37-1581569

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MCCLLOUD, SHARRON D  
620 LONGDALE AVE.  
LONGWOOD, FL 32750 US

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

MCCLLOUD, SHARRON D  
861 WILDMERE AVE.  
104  
LONGWOOD, FL 32750 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:**

05/01/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** GILBERT, LEON L  
**Address:** 1100 E. HARRISON STREET  
**City-St-Zip:** OVIEDO, FL 32765 US

**Title:** VP  
**Name:** COTTON, SHANNON C  
**Address:** 1100 E. HARRISON STREET  
**City-St-Zip:** OVIEDO, FL 32765 US

**Title:** TREA  
**Name:** JONES, BETTY A  
**Address:** 1100 E. HARRISON STREET  
**City-St-Zip:** OVIEDO, FL 32765 US

**Title:** SEC.  
**Name:** MCCLLOUD, SHARRON  
**Address:** 861 WILDMERE AVE. APT. 104  
**City-St-Zip:** LONGWOOD, FL 32750 US

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:** SHARRON MCCLLOUD

SEC

05/01/2012

Electronic Signature of Signing Officer or Director

Date