

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19611

FILED  
Apr 20, 2012  
Secretary of State

**Entity Name:** JOHN DAVID KIRBY MINISTRIES, INC.

**Current Principal Place of Business:**

% JOHN D. KIRBY  
4690 WOODSTOCK ROAD  
SAINT JAMES CITY, FL 33956

**New Principal Place of Business:**

**Current Mailing Address:**

% JOHN D. KIRBY  
4690 WOODSTOCK ROAD  
SAINT JAMES CITY, FL 33956

**New Mailing Address:**

**FEI Number:** 59-2779016

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KIRBY, JOHN D.  
4690 WOODSTOCK ROAD  
SAINT JAMES CITY, FL 33956 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: DP  
Name: KIRBY, JOHN D.  
Address: 4690 WOODSTOCK ROAD  
City-St-Zip: SAINT JAMES CITY, FL

Title: DST  
Name: KIRBY, SARAH C.  
Address: 4690 WOODSTOCK ROAD  
City-St-Zip: SAINT JAMES CITY, FL

Title: D  
Name: SPEARING, RONNIE  
Address: 1045 BETHLEHEM CHURCH ROAD  
City-St-Zip: FITZGERALD, GA 31750

Title: D  
Name: SPEARING, BELINDA  
Address: 1045 BETHLEHEM CHURCH ROAD  
City-St-Zip: FITZGERALD, GA 31750

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: JOHN D. KIRBY

DP

04/20/2012

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

\_\_\_\_\_  
Date