

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19849

FILED  
Apr 29, 2009  
Secretary of State

**Entity Name:** SERVANTS OF CHRIST MINISTRIES, INC.

**Current Principal Place of Business:**

4934 HIDDEN HILL DR.  
P O BOX 90964  
LAKELAND, FL 33804

**New Principal Place of Business:**

4934 HIDDEN HILL DR.  
LAKELAND, FL 33804

**Current Mailing Address:**

4934 HIDDEN HILL DR.  
P O BOX 90964  
LAKELAND, FL 33804

**New Mailing Address:**

4934 HIDDEN HILL DR.  
POST OFFICE BOX 90964  
LAKELAND, FL 33804

**FEI Number:** 59-2791462

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TROXELL, ALMA  
4934 HIDDEN HILL DR.  
LAKELAND, FL 33813 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: PSTD ( ) Delete  
Name: TROXELL, ALMA  
Address: 4934 HIDDEN HILL DR.  
City-St-Zip: LAKELAND, FL 33813

Title: D ( ) Delete  
Name: FEAR, CHRISTOPHER  
Address: 1211 ROLLING WOOD LANE  
City-St-Zip: LAKELAND, FL 33813

Title: D ( ) Delete  
Name: HOLT, DONNA  
Address: 1012 AVON AVE  
City-St-Zip: LAKELAND, FL 33801

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: BAILEY, DOUGLAS  
Address: 2601 SLEEPY HOLLOW LANE  
City-St-Zip: LAKELAND, FL 33810

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: CHRISTOPHER M. FEAR

D

04/29/2009

Electronic Signature of Signing Officer or Director

Date