

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21576

FILED  
Apr 04, 2007  
Secretary of State

Entity Name: MIGHTY WIND MINISTRIES, INC.

## Current Principal Place of Business:

C/O JOAN BYERS  
609 LAKE AVENUE  
ALTAMONTE SPRINGS, FL 32701 US

## Current Mailing Address:

C/O JOAN BYERS  
609 LAKE AVENUE  
ALTAMONTE SPRINGS, FL 32701 US

## New Principal Place of Business:

C/O JOAN BYERS  
4590 S. ATLANTIC AVE., #246  
PONCE INLET, FL 32127 US

## New Mailing Address:

C/O JOAN BYERS  
4590 S. ATLANTIC AVE., #246  
PONCE INLET, FL 32127 US

FEI Number: 59-2836471

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BYERS, JOAN  
609 LAKE AVENUE  
ALTAMONTE SPRINGS, FL 32701 US

## Name and Address of New Registered Agent:

BYERS, JOAN P  
4590 S. ATLANTIC AVE., #246  
PONCE INLET, FL 32127 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: JOAN P. BYERS

04/04/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: BYERS, JOAN P  
Address: 609 LAKE AVENUE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D ( ) Delete  
Name: BYERS, ESTHER  
Address: SHANNONDALE #513 801 VANOSDALE RD  
City-St-Zip: KNOXVILLE, TN 37909

Title: D ( ) Delete  
Name: HATCHER, DANIEL F  
Address: 13430 CORAM PEAK  
City-St-Zip: SAN ANTONIO, TX

Title: D ( ) Delete  
Name: TYLER, DANIEL  
Address: 13430 CORAM PEAK  
City-St-Zip: SAN ANTONIO, TX

Title: DC ( ) Delete  
Name: LINTON, PEGGY  
Address: 441 EAST HILLCREST STREET  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D ( ) Delete  
Name: MILLER, BRENDA  
Address: 8004 BENNINGTON ROAD  
City-St-Zip: KNOXVILLE, TN 37919

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: BYERS, JOAN P  
Address: 4590 S. ATLANTIC AVE., #246  
City-St-Zip: PONCE INLET, FL 32127 US

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

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

Title: D (X) Change ( ) Addition  
Name: TYLER, DANIEL  
Address: 3927 HIGHWAY 441 NORTH  
City-St-Zip: PLYMOUTH, FL 32768 US

Title: DC (X) Change ( ) Addition  
Name: LINTON, PEGGY  
Address: 441 EAST HILLCREST STREET  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

Title: D (X) Change ( ) Addition  
Name: MILLER, BRENDA  
Address: 8004 BENNINGTON ROAD  
City-St-Zip: KNOXVILLE, TN 37919 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JOAN P. BYERS

P

04/04/2007

Electronic Signature of Signing Officer or Director

Date