

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2009
Secretary of State

DOCUMENT# N31010

Entity Name: DAVID MCABEE MINISTRIES INCORPORATED

Current Principal Place of Business:

C/O DAVID A. MCABEE
1204 FAIRBURN AVENUE
CLEARWATER, FL 33755

New Principal Place of Business:

Current Mailing Address:

C/O DAVID A. MCABEE
1204 FAIRBURN AVENUE
CLEARWATER, FL 33755

New Mailing Address:

FEI Number: 59-2945957 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MCABEE, DAVID A.
1204 FAIRBURN AVENUE
CLEARWATER, FL 33755 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: D () Delete
Name: MCABEE, DAVID A.
Address: 1204 FAIRBURN AVENUE
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: MCABEE, PATRICIA JEAN
Address: 1204 FAIRBURN AVENUE
City-St-Zip: CLEARWATER, FL 33755

Title: D (X) Delete
Name: MCABES, ASHRYN
Address: 1260 ENGMAN ST, APT 101
City-St-Zip: CLEARWATER, FL 33755

Title: D (X) Delete
Name: MCABEE, CHRISTI
Address: 1260 ENGMAN ST., APT 101
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: LETT, MARGARET K
Address: 625 DUCHESS BLVD
City-St-Zip: DUNEDIN, FL 34698

Title: D () Delete
Name: FYFE, WANDA
Address: 941 WEATHERSFIELD DR
City-St-Zip: DUNEDIN, FL 34698

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MCABEE, DAVID A PRES
Address: 1204 FAIRBURN AVENUE
City-St-Zip: CLEARWATER, FL 33755

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

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

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City-St-Zip:

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

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

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: DAVID A. MCABEE

PRES

07/09/2009

Electronic Signature of Signing Officer or Director

_____ Date