

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 03, 2008 08:00 A
Secretary of State

DOCUMENT # N33204

1. Entity Name

OPERATION EVANGELISM, INC.



Principal Place of Business

% RONALD R. SANDERS
10539 122ND AVE N
LARGO FL 33773
US

Mailing Address

% RONALD R. SANDERS
10539 122ND AVE N
LARGO FL 33773
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SANDERS, RONALD R.
1539-122ND AVE N
LARGO FL 33773

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when reconstituting)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete
NAME SANDERS, RONALD R.
STREET ADDRESS 7300-120TH AVE N.
CITY-ST-ZIP LARGO FL

TITLE DPS ☐ Delete
NAME SANDERS, RONALD R
STREET ADDRESS 10539-122ND AVE N
CITY-ST-ZIP LARGO FL 33773

TITLE DV ☐ Delete
NAME ALIGOOD, ROBERT
STREET ADDRESS 3241 30TH AVE. N
CITY-ST-ZIP SAINT PETERSBURG FL 33713

TITLE D ☐ Delete
NAME CAMPBELL, MELVIN
STREET ADDRESS 1738 ARKANSAS AVE.
CITY-ST-ZIP LYNCHBURG VA 24501

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
U00000845491
03/13/08-80040-021 61.25

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Ronald R. Sanders* **Ronald R. Sanders** 2/28/08 722 393 8956