

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39529

FILED
Mar 01, 2007
Secretary of State

Entity Name: CAPERNAUM MINISTRIES, INC.

Current Principal Place of Business:

C/O WAY, JAMES
1640 PARK AVE., STE. B
INDIAN LAKE ESTATES, FL 338557275 US

New Principal Place of Business:

Current Mailing Address:

C/O WAY, JAMES
P.O. BOX 7275
INDIAN LAKE ESTATES, FL 338557275 US

New Mailing Address:

FEI Number: 59-3011848

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAY, JAMES S
P.O. BOX 7275
INDIAN LAKE ESTATES, FL 338557275 US

Name and Address of New Registered Agent:

WAY, JAMES S
1640 PARK AVE
SUITE B
INDIAN LAKE ESTATES, FL 338557275 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: _____

03/01/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WAY, JAMES S
Address: 2970 HIBISCUS DR
City-St-Zip: INDIAN LAKE ESTATES, FL 338557809 US

Title: VP () Delete
Name: SHIPMAN, FREDERICK
Address: 365 JOG ROAD
City-St-Zip: WEST PALM BEACH, FL 33415 US

Title: TD () Delete
Name: WALTON, EUGENE P
Address: 2850 PALM AVE.
City-St-Zip: INDIAN LAKE ESTATES, FL 338557807 US

Title: D () Delete
Name: BALL, ROGER
Address: 455 SW 58TH AVE
City-St-Zip: VERO BEACH, FL 32968 US

Title: SD () Delete
Name: MILLER, TROY
Address: 5688 E. SR 44
City-St-Zip: WILDWOOD, FL 34785 US

Title: D () Delete
Name: SMITH, CLIFTON
Address: 7 W MAIN STREET, STE 300
City-St-Zip: APOPKA, FL 32703 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
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Address:
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 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: EUGENE P WALTON JR

TD

03/01/2007

Electronic Signature of Signing Officer or Director

Date