

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

FILED
Apr 15, 2008 8:00 am
Secretary of State

04-15-2008 90015 020 ****61.25

DOCUMENT # N40898

1. Entity Name

DAYSPRING MINISTRIES OF FRUITLAND PARK, INC.



Principal Place of Business

509 WEST BERCKMAN STREET
FRUITLAND PARK FL 34731

Mailing Address

509 WEST BERCKMAN STREET
FRUITLAND PARK FL 34731



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E037 (10/07)

Zip

Country

Zip

Country

4. FEI Number

59-2204301

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

TAYLOR, LAWRENCE E - ATTORNEY
1029 W MAGNOLIA ST
LEESBURG FL 34748

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 is not used when resigning)

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 PD ☐ Delete
NAME BELL, CHRIS
STREET ADDRESS 110 BERCKMAN STREET
CITY-STATE-ZIP FRUITLAND PARK FL 34731

TITLE T ☐ Delete
NAME HANSARD, ELBERT
STREET ADDRESS 2021 TOBY LANE
CITY-STATE-ZIP FRUITLAND PARK FL 34731

TITLE VPD ☐ Delete
NAME LEE, SADIE
STREET ADDRESS 1225 LEWIS ROAD
CITY-STATE-ZIP FRUITLAND PARK FL 34731

TITLE D ☐ Delete
NAME NEWTON, BLANCH
STREET ADDRESS 1321 DORA DR
CITY-STATE-ZIP LEESBURG FL 34748

TITLE D ☐ Delete
NAME SEXTON, BETTY
STREET ADDRESS 301 S CORDOVA PL
CITY-STATE-ZIP LEESBURG FL 34748

TITLE D ☒ Delete
NAME STEWART, JIMMIE
STREET ADDRESS 104 W. GRIFFIN ST
CITY-STATE-ZIP FRUITLAND PARK FL 34731

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

TITLE ☐ Change ☒ Addition
NAME D. WARD SPARKS
STREET ADDRESS 33520 Pteciola Dr
CITY-STATE-ZIP Fruitland Park, FL 34731

TITLE ☐ Change ☒ Addition
NAME D. Shirley Ludgate
STREET ADDRESS 817 Carroll St
CITY-STATE-ZIP Wildwood, FL 34785

TITLE ☐ Change ☒ Addition
NAME D. Peggy Treen
STREET ADDRESS 303 W. VALLEY RD.
CITY-STATE-ZIP Fruitland Park, FL 34731

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:

Sadie Lee

2-18-08

352-787-1677