

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43327

FILED
Apr 22, 2010
Secretary of State

Entity Name: CLEOPATRA J. STEELE MINISTRIES, INC.

Current Principal Place of Business:

127 ESCAMBIA ST
LAKE CITY, FL 32055 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2862
C/O J. STEELE
LAKE CITY, FL 32055 US

New Mailing Address:

P.O. BOX 2862
LAKE CITY, FL 32055 US

FEI Number: 59-3101419

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STEELE, CLEOPATRA J.
224 SE COUNTRY CLUB ROAD
LAKE CITY, FL 32025 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: P
Name: STEELE, CLEOPATRA J
Address: 224 SE CNTRY CLUB RD
City-St-Zip: LAKE CITY, FL 32025

Title: D
Name: STEELE, MITCHELL D
Address: P.O. BOX 3261
City-St-Zip: LAKE CITY, FL 32056

Title: S
Name: HAYES, BETTY
Address: 223 SE LILLIAN LP, # 103
City-St-Zip: LAKE CITY, FL 32025

Title: T
Name: FIELDS, FANNIE
Address: 323 SW ROYAL CT
City-St-Zip: LAKE CITY, FL 32024

Title: VD
Name: HAYES, WAYNE
Address: 223 SE LILLIAN LOOP, #103
City-St-Zip: LAKE CITY, FL 32025

Title: D
Name: HOLSEY, MARJORIE
Address: 315 NE NINK PL
City-St-Zip: LAKE CITY, FL 32055

I hereby 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 all other like empowered.

SIGNATURE: CLEOPATRA J. STEELE

P

04/22/2010

Electronic Signature of Signing Officer or Director

_____ Date