

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N45541

**FILED**  
**Mar 28, 2012**  
**Secretary of State**

**Entity Name:** CONQUEST MINISTRIES, INC.

**Current Principal Place of Business:**

2524 S MELLONVILLE  
SANFORD, FL 32773 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 785  
SANFORD, FL 327720785 US

**New Mailing Address:**

**FEI Number:** 59-3121769

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FREEMAN, KEITH  
2656 S MAGNOLIA AVE  
SANFORD, FL 32771 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:** DS  
**Name:** CARTER, SANDRA  
**Address:** 2524 S MELLONVILLE  
**City-St-Zip:** SANFORD, FL

**Title:** DV  
**Name:** ALLEN, IMOGENE  
**Address:** 9701 ORNAGE CITY RD.  
**City-St-Zip:** ALTAMONTE SPGS., FL

**Title:** DP  
**Name:** FREEMAN, KEITH  
**Address:** 2656 S MAGNOLIA AVE  
**City-St-Zip:** SANFORD, FL

**Title:** VPT  
**Name:** FREEMAN, PENNY  
**Address:** 2656 S MAGNOLIA AVE  
**City-St-Zip:** SANFORD, FL

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:** PENNY FREEMAN

VPT

03/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date