2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 14, 2007 8:00 am
Secretary of State
02-14-2007 90064 046 ****70.00

DOCUMENT # N46458

1. Entity Name

RON MOORE MINISTRIES, INC.

Principal Place of Business	Mailing Address
22850 SKYVIEW CIRCLE BROOKSVILLE FL 34602 US	22850 SKYVIEW CIRCLE BROOKSVILLE FL 34602 US

1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
22850 SKYVIEW CIR	P.O. Box SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.
BROOKSVILLE	BROOKSVILLE
City & State	City & State
FL	FL
Zip 34602 Country USA	Zip 34602 Country

4. FEI Number 59-3098505 ☐ 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
MOORE, RONALD E. SR. 22850 SKYVIEW CIRCLE BROOKSVILLE FL 34602	Name SAME 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 Ronald E Moore Sr RONALD E MOORE SR 1-16-07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2007

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D GRUBBS, CLYDE 8727 N 34 ST TAMPA FL 33404	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D DR-AFTON OGLESBY Rel 2753 MONTANA Rd OTTAWA-KS 66067	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D MOORE, RONALD JR 10-A OLD FLOOD RD MERRIMACK NH 03054	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D DECARMO, JOHN 238 BAYVIEW DR STUMPY POINT NC 27978	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D CHAPMAN, AL #4 LILAC LANE FARMINGTON CT	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	P MOORE, RONALD E SR 22850 SKYVIEW CIRCLE BROOKSVILLE FL 34602	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	VTS MOORE, JOYCE P. 22850 SKYVIEW CIRCLE BROOKSVILLE FL 34602	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Change ☐ Addition

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 E Moore Sr RONALD E MOORE SR - 1-16-07 352-799 6942
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR