2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46550

FILED Jan 03, 2008 Secretary of State

DOCON		330		Secretary or State	
Entity Na	me: MIKE COY	LE MINISTRIES, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	51AT AVENUE W, FL 34420	US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P. O. BOX BELLEVIE	(3700 W, FL 34421	US			
FEI Number	: 23-7426353	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
10809 S. E BELLEVIE The above in the Stat	e of Florida.	US ubmits this statement for the	purpose of changing its register	ed office or registered agent, or both,	
SIGNATU		c Signature of Registered Ag	ent	 Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () COYLE, MICHAI 10809 S. E. 51S BELLEVIEW, FL	T AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () COYLE, JOANN 10809 S. E. 51S BELLEVIEW, FL	T AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: Citv-St-Zip:	COYLE, TODD N 2309 SYCAMOR		Title: Name: Address: Citv-St-Zip:	() Change() Addition	

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL E. COYLE PRES 01/03/2008