

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48112

**FILED**  
**Apr 08, 2011**  
**Secretary of State**

**Entity Name:** ENRIGHT FLIGHT MINISTRIES, INC.

**Current Principal Place of Business:**

1919 JACKSON LANE  
PORT ORANGE, FL 32128 US

**New Principal Place of Business:**

**Current Mailing Address:**

1919 JACKSON LANE  
PORT ORANGE, FL 32128 US

**New Mailing Address:**

**FEI Number:** 59-3150545      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

LEDGERWOOD, EILEEN  
1919 JACKSON LANE  
PORT ORANGE, FL 32128 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: D  
Name: LEDGERWOOD, EILEEN  
Address: 1919 JACKSON LANE  
City-St-Zip: PORT ORANGE, FL 32128

Title: D  
Name: ENRIGHT, LORRAINE  
Address: 1919 JACKSON LANE  
City-St-Zip: PORT ORANGE, FL 32128

Title: D  
Name: LEDGERWOOD, JOHN  
Address: 1919 JACKSON LANE  
City-St-Zip: PORT ORANGE, FL 32128

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: EILEEN LEDGERWOOD

D

04/08/2011

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

\_\_\_\_\_  
Date