

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000895

Entity Name: YOUNG MINISTRIES, INC.

FILED
Jan 09, 2009
Secretary of State

Current Principal Place of Business:

11026 W SEMINOLE PL.
HOMOSASSA, FL 34448

New Principal Place of Business:

11026 W SEMINOLE PL.
HOMOSASSA, FL 34448 US

Current Mailing Address:

11026 W SEMINOLE PL.
HOMOSASSA, FL 34448 US

New Mailing Address:

FEI Number: 59-3158541 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YOUNG, MARSHALL RSH L SR
11026 W SEMINOLE PL.
HOMOSASSA, FL 34448 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: PD () Delete
Name: YOUNG, MARSHALL L SR
Address: 11026 W. SEMINOLE PL.
City-St-Zip: HOMOSASSA, FL 34487

Title: SD () Delete
Name: YOUNG, DORIS A
Address: 11026 W. SEMINOLE PL.
City-St-Zip: HOMOSASSA, FL 34487

Title: TD () Delete
Name: YOUNG, MICHAEL W
Address: 1100 OAK BRIDGE PARK WAY
City-St-Zip: LAKE LAND, FL 33803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: YOUNG, MARSHALL L SR
Address: 11026 W. SEMINOLE PL.
City-St-Zip: HOMOSASSA, FL 34448 US

Title: SD (X) Change () Addition
Name: YOUNG, DORIS A
Address: 11026 W. SEMINOLE PL.
City-St-Zip: HOMOSASSA, FL 34448 US

Title: TD (X) Change () Addition
Name: YOUNG, MICHAEL W
Address: 1100 OAK BRIDGE PARK WAY
City-St-Zip: LAKE LAND, FL 33803 US

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: MARSHALL L. YOUNG, SR.

PD

01/09/2009

Electronic Signature of Signing Officer or Director

Date