


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90215 038 ****61.25

DOCUMENT # N94000000922	
1. Entity Name FIELD OF JOY MINISTRIES, INC.	

Principal Place of Business 750 GROVE PARK CIRCLE N/A FERNANDINA BEACH, FL 32034 US	Mailing Address 750 GROVE PARK CIRCLE N/A FERNANDINA BEACH, FL 32034 US
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

04232007 Chg-NP CR2E037 (12/06)

4. FEI Number 59-3217140	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
COOP, EDWARD M 750 GROVE PARK CIRCLE N/A FERNANDINA BCH, FL 32034		Name	
		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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing 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	PD COOP, EDWARD M 750 GROVE PRK CIRCLE FERNANDINA BCH, FL 32034 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Green, Gerrard 110 N. 13th Street FERNANDINA BEACH, FL 32034 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD COOP, ROSEMARY C 750 GROVE PARK CIRCLE FERNANDINA BCH, FL 32034 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COOP, CATHY S 40 COLONIAL DRIVE BARNWELL, SC 29812 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT MIDDLETON, DIANA 1911 SUNRISE DR FERNANDINA BEACH, FL 32034 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CAMPBELL, PATRICK 95216 TORI TR FERNANDINA BEACH, FL 32034 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACOBS, LINDA 3044 PERSIMMON CI3 FERNANDINA BEACH, FL 32034 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/23/2007 9047530146
Date Daytime Phone #

2007 NON-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # N94000000922

1. Entity Name
FIELD OF JOY MINISTRIES, INC.



ATTACHMENT

40083799

Principal Place of Business
750 GROVE PARK CIRCLE
N/A
FERNANDINA BEACH, FL 32034 US

Mailing Address
750 GROVE PARK CIRCLE
N/A
FERNANDINA BEACH, FL 32034 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

04232007 Chg-NP CP2E037 (12/06)

Suite, Apt. #, etc.

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City & State

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Not Applicable

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6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COOP, EDWARD M
750 GROVE PARK CIRCLE
N/A
FERNANDINA BCH, FL 32034

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

Please delete the following person from the annual report.

Carter, Florence
1525 Simmons Road
Fernandina Beach, Florida 32034

Edward M. Coop

04/24/2007

904 753-0146