

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2007 08:00 A
Secretary of State

DOCUMENT # N94000005969

1. Entity Name
DAVID VAN WINKLE MINISTRIES INC.



Principal Place of Business
1503 SOUTH MARY ST.
EUSTIS, FL 32726 US

Mailing Address
1503 SOUTH MARY ST
EUSTIS, FL 32726 US



04072007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3278739

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

VAN WINKLE, DAVID M
1503 SOUTH MARY ST.
EUSTIS, FL 32726

**DO NOT WRITE
IN THIS SPACE**

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	VAN WINKLE, DAVID M
STREET ADDRESS	1503 SOUTH MARY ST.
CITY-ST-ZIP	EUSTIS, FL 32726
TITLE	D
NAME	BLANKENSHIP, RON
STREET ADDRESS	6013 BAY VALLEY CT.
CITY-ST-ZIP	ORLANDO, FL 32819
TITLE	D
NAME	MAJETICH, JILL
STREET ADDRESS	2926 EGLINGTON DR.
CITY-ST-ZIP	ORLANDO, FL 32806
TITLE	D
NAME	MAJETICH, CHARLES G
STREET ADDRESS	2926 EGLINGTON DR.
CITY-ST-ZIP	ORLANDO, FL 32806
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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04/24/07-80133-001 61.25

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:

David M. Van Winkle

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-11-07 352-516-9122