

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000342

FILED  
Mar 27, 2009  
Secretary of State

Entity Name: PEP MINISTRIES, INC.

## Current Principal Place of Business:

9 ROSALIE OAKS BOULEVARD  
LAKE WALES, FL 33898

## New Principal Place of Business:

## Current Mailing Address:

9 ROSALIE OAKS BOULEVARD  
LAKE WALES, FL 33898

## New Mailing Address:

FEI Number: 59-3297627

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PARRISH, PAUL E  
9 ROSALIE OAKS BOULEVARD  
LAKE WALES, FL 33853 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 ( ) Delete  
Name: PARRISH, PAUL E  
Address: 9 ROSALIE OAKS BOULEVARD  
City-St-Zip: LAKE WALES, FL 33898

Title: D ( ) Delete  
Name: PARRISH, TRUMELIA A  
Address: 9 ROSALIE OAKS BOULEVARD  
City-St-Zip: LAKE WALES, FL 33898

Title: D ( ) Delete  
Name: PARRISH, M. EUGENE  
Address: 9 ROSALIE OAKS BOULEVARD  
City-St-Zip: LAKE WALES, FL 33898

Title: D ( ) Delete  
Name: HOLLEY, I. SHURRAIN  
Address: 9 ROSALIE OAKS BOULEVARD  
City-St-Zip: LAKE WALES, FL 33898

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: PARRISH, TRUMELLA A  
Address: 9 ROSALIE OAKS BOULEVARD  
City-St-Zip: LAKE WALES, FL 33898

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: PAUL E. PARRISH

D

03/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date