

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002343

FILED  
Apr 12, 2009  
Secretary of State

**Entity Name:** TWIN CITIES MINISTERIAL ASSOCIATION, INC.

**Current Principal Place of Business:**

2101 N. PARTIN DRIVE  
NICEVILLE, FL 32578

**New Principal Place of Business:**

**Current Mailing Address:**

2101 N. PARTIN DRIVE  
NICEVILLE, FL 32578

**New Mailing Address:**

**FEI Number:** 59-3326701

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRETE, ROBERT L REV  
277 WAVA AVENUE  
NICEVILLE, FL 32578 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: GRIDER, DR. JOE  
Address: 1800 EAST JOHN SIMS PARKWAY  
City-St-Zip: NICEVILLE, FL 32578

Title: DV ( ) Delete  
Name: BROWN, DENNIS  
Address: 622 BAYSHORE DRIVE  
City-St-Zip: NICEVILLE, FL 32578

Title: SD ( ) Delete  
Name: HAGUE, LINDA  
Address: 106 PORTER AVENUE  
City-St-Zip: NICEVILLE, FL 32578

Title: TD ( ) Delete  
Name: GRETE, ROBERT L DR  
Address: 2101 N PARTIN DRIVE  
City-St-Zip: NICEVILLE, FL 32578

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: GRIDER, JOE DR.  
Address: 1800 EAST JOHN SIMS PARKWAY  
City-St-Zip: NICEVILLE, FL 32578

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

Title: SD (X) Change ( ) Addition  
Name: GROSECLOSE, WIN REV  
Address: 2101 NORTH PARTIN DRIVE  
City-St-Zip: NICEVILLE, FL 32578

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: ROBERT L GRETE

DR

04/12/2009

Electronic Signature of Signing Officer or Director

Date