

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005978

FILED
Jan 07, 2008
Secretary of State

Entity Name: BATTLEFIELD MINISTRIES, INC.

Current Principal Place of Business:

12105 SANDOWN CT.,
BRISTOW,, VA 20136

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 641,
BRISTOW, VA 20136

New Mailing Address:

FEI Number: 65-0633374

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUTH, JOUDRY G
12105 SANDOWN CT.,
BRISTOW, VA, FL 33873 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: STUART, DEBRA J A
Address: 505 S 2ND STREET STE 200
City-St-Zip: FORT PIERCE, FL 34950

Title: SD () Delete
Name: JOSEPH, JOHN P ESQ.
Address: 7650 GIBALTER CT N
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: VTD () Delete
Name: BELFON, KELVEN
Address: 20 CRYSTAL STREET,
City-St-Zip: MELROSE, MA 02176

Title: PD () Delete
Name: JOUDRY, PETER A
Address: 12105 SANDOWN CT.
City-St-Zip: BRISTOW,, VA 20136

Title: D () Delete
Name: BENCOMO, SHANNON
Address: 166 RIVER OAKS DRIVE,
City-St-Zip: HELENA, AL 35080

Title: D () Delete
Name: WELNER, DANA
Address: 303 N MEADOWS DRIVE
City-St-Zip: MORGANTON, NC 28655

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VTD (X) Change () Addition
Name: BELFON, KELVEN
Address: 2743 STARGRASS CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

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

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

Title: D (X) Change () Addition
Name: WELNER, DANA
Address: 160C SWEETBRIAR LANE
City-St-Zip: MORGANTON, NC 28655

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: PETER JOUDRY

PRES

01/07/2008

Electronic Signature of Signing Officer or Director

Date