

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000006032

FILED  
Jun 23, 2009  
Secretary of State

**Entity Name:** SHEPHERD'S MEN'S BASKETBALL MINISTRY, INC.

**Current Principal Place of Business:**

1820 18TH AVE SO  
ST PETERSBURG, FL 33712

**New Principal Place of Business:**

**Current Mailing Address:**

1820 18TH AVE SO  
ST PETERSBURG, FL 33712

**New Mailing Address:**

**FEI Number:** 59-3384864      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

WILLIAMS, CLYDE E  
532 33RD ST SOUTH  
ST PETERSBURG, FL 33712      US

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: CD      ( ) Delete  
Name: WILLIAMS, WALTER J  
Address: 2403 TROPICAL SHORE DR  
City-St-Zip: ST. PETERSBURG, FL 33705

Title: VCD      ( ) Delete  
Name: TARVER, FLEMING  
Address: 2500 PENNSYLVANIA AVE. N.  
City-St-Zip: CLEARWATER, FL 34615

Title: D      ( ) Delete  
Name: HOPKINS, CALVIN  
Address: 1820 WALTOS ST SOUTH  
City-St-Zip: ST PETERSBURG, FL 33712

Title: D      ( ) Delete  
Name: WELCH, JOHNNIE  
Address: 1137 37TH ST SO  
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: S      ( ) Delete  
Name: WADE, RONALD  
Address: 1401 18TH AVE SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33712

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

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

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

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

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: WALTER J. WILLIAMS

DIR.

06/23/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date