

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 07, 2010
Secretary of State

Entity Name: MEADE MINISTRIES, INC.

Current Principal Place of Business:

5037 SW CR 240
LAKE CITY, FL 32024

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 2307
LAKE CITY, FL 320562307

New Mailing Address:

FEI Number: 58-2211310

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEADE, MARLENE H
976 SW HAMLET CIRCLE
SOUTHWOOD ESTATES
LAKE CITY, FL 32024 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: O
Name: MEADE, CHARLES PRESIDE
Address: 976 SW HAMLET CIRCLE
City-St-Zip: LAKE CITY, FL 32024

Title: O
Name: MEADE, MARLENE H VICE/SE
Address: 976 SW HAMLET CIRCLE
City-St-Zip: LAKE CITY, FL 32024

Title: D
Name: BURBACH, JAMES M
Address: 138 SW HAMLET CIRCLE
City-St-Zip: LAKE CITY, FL 32024

Title: D
Name: SPARKS JR, CHARLES S
Address: 1895 SW LITTLE ROAD
City-St-Zip: LAKE CITY, FL 32024

Title: D
Name: BURBACH, SAMUEL J
Address: 891 SW LITTLE ROAD
City-St-Zip: LAKE CITY, FL 32024

Title: D
Name: NICKELSON, AARON
Address: 1272 SW WALTER AVE.
City-St-Zip: LAKE CITY, FL 32024

I hereby 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 all other like empowered.

SIGNATURE: MARLENE H MEADE

VP

01/07/2010

Electronic Signature of Signing Officer or Director

Date