

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 12, 2008 8:00 am**  
**Secretary of State**

03-12-2008 90025 021 \*\*\*\*61.25

**DOCUMENT # N96000000751**

1. Entity Name

THE POTTER HOUSE MINISTRY, INC.



Principal Place of Business

461 NORTH 19  
PERRY FL 32348

Mailing Address

P.O. BOX 320  
PRRY FL 32348



2. Principal Place of Business - No P.O. Box #

461 NORTH 19

3. Mailing Address

PO BOX 320

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/07)

City & State

Perry FL

City & State

Perry FL

4. FEI Number

59-3358777

Applied For

Not Applicable

Zip

32348

Country

USA

Zip

32348

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

HARRIS, PATRICIA A SEC.  
461 NORTH 19  
PERRY FL 32347

7. Name and Address of New Registered Agent

Name Frances L. James

Street Address (P.O. Box Number is Not Acceptable)

621 Plantation Rd

City Perry

FL

Zip Code

32348

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Frances L. James* Frances L. James 3/2/08

Signature, typed or printed name of registered agent and not applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

**Make Check Payable to:**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE TP  
NAME SLADE, ALZO ☐ Delete  
STREET ADDRESS 3108 HAWKSLANDING  
CITY - ST - ZIP TALLAHASSEE FL 32309

TITLE SEC  
NAME HARRIS, PATRICIA ☒ Delete  
STREET ADDRESS 250 FRONT STREET  
CITY - ST - ZIP PERRY FL 32348

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE Sec. ☒ Change ☐ Addition  
NAME James Frances L.  
STREET ADDRESS 621 Plantation Rd  
CITY - ST - ZIP Perry, FL 32348

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with or other like empowered.

SIGNATURE:

*Alzo Slade* Alzo Slade 3-2-08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

First

Last Name