

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001667

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** HANDS OF GOD MINISTRIES, INC.

**Current Principal Place of Business:**

2918 E 27TH AVE  
TAMPA, FL 33605 US

**New Principal Place of Business:**

**Current Mailing Address:**

2918 E 27TH AVE  
TAMPA, FL 33605 US

**New Mailing Address:**

**FEI Number:** 59-3379973

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FERGUSON, CLAYTON BISHOP  
11529 BESSIE DIX RD  
SEFFNER, FL 33584 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  
Name: PEARSON, MARK  
Address: 12212 KNOLTY PINE LOOP  
City-St-Zip: SAN ANTONIO, FL 33576

Title: D  
Name: CAMPBELL, JEFFERY ANN  
Address: 3501 E. 33RD AVE.  
City-St-Zip: TAMPA, FL 33610

Title: DT  
Name: FERGUSON, DOROTHY  
Address: 11529 BESSIE DIX RD  
City-St-Zip: SEFFNER, FL 33584

Title: DS  
Name: TAYLOR, CHARLENE  
Address: 6421 N 41ST ST  
City-St-Zip: TAMPA, FL 33610

Title: D  
Name: BLACK, MARION  
Address: 2202 N ARMENIA AVE  
City-St-Zip: TAMPA, FL 33607

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: BISHOP CLAYTON FERGUSON

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01/05/2011

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

\_\_\_\_\_  
Date