

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002147

FILED  
Apr 24, 2007  
Secretary of State

Entity Name: LARRY D. FORD MINISTRIES, INC.

## Current Principal Place of Business:

11000 METRO PKWY #1A  
FORT MYERS, FL 33966 12

## New Principal Place of Business:

## Current Mailing Address:

11000 METRO PKWY #1A  
FORT MYERS, FL 33966 12

## New Mailing Address:

FEI Number: 65-0683777      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

FORD, LARRY  
18210 SANDY PINES CIRCLE  
FORT MYERS, FL 33917 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: MELVIN, RICHARD  
Address: 33 SHERIDAN RD  
City-St-Zip: POLAND, OH 44514

Title: DST ( ) Delete  
Name: SCHWARTZ, LESA  
Address: 10809 ARROW TREE BLVD  
City-St-Zip: CLERMONT, FL 34715

Title: VP ( ) Delete  
Name: FORD, SHERRYL  
Address: 18210 SANDY PINES CIRCLE  
City-St-Zip: FT MYERS, FL 33917

Title: T ( ) Delete  
Name: CASH, THOMAS  
Address: 12848 HAVENRIDGE CIRCLE  
City-St-Zip: FORT MYERS, FL 33912

Title: D ( ) Delete  
Name: MAXWELL, CATHY  
Address: P.O. BOX 805  
City-St-Zip: SANIBEL, FL 33957

Title: D ( ) Delete  
Name: VEGA, JOEL  
Address: 11520 PLANTATION PRESERVE CIRCLE  
City-St-Zip: FORT MYERS, FL 33912

## 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:

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: LARRY FORD

PRES

04/24/2007

Electronic Signature of Signing Officer or Director

Date