

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002699

**FILED**  
**Apr 09, 2010**  
**Secretary of State**

**Entity Name:** MIKE KRUGER MINISTRIES, INC.

**Current Principal Place of Business:**

5147 FLICKER FIELD CIRCLE  
SARASOTA, FL 34231

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 19291  
SARASOTA, FL 34276

**New Mailing Address:**

PO BOX 19291  
SARASOTA, FL 34276

**FEI Number:** 65-0682717

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KRUGER, MARJORIE I  
5147 FLICKER FIELD CIRCLE  
SARASOTA, FL 34231 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: DV  
Name: HAMMER, KAY  
Address: 1245 MOORE WOOD RD  
City-St-Zip: HIGHLANDS, NC 28741

Title: T  
Name: COOKERLY, KELLY  
Address: 5147 FLICKER FIELD CIR.  
City-St-Zip: SANSOTA, FL

Title: DP  
Name: KRUGER, MARJORIE  
Address: 1945 GULF OF MEXICO #314  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: DS  
Name: SIGFUSSON, BECKY  
Address: 311 E 7TH ST  
City-St-Zip: HINSDALE, FL

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: MARJORIE KRUGER

DP

04/09/2010

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

\_\_\_\_\_  
Date