

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004280

FILED  
Apr 18, 2011  
Secretary of State

Entity Name: MY HOUSE MINISTRIES INC.

**Current Principal Place of Business:**

6447 MOONLIGHT LANE  
CRESTVIEW, FL 32539

**New Principal Place of Business:**

777 BEAL PARKWAY  
FT WALTON BEACH, FL 32547

**Current Mailing Address:**

6447 MOONLIGHT LANE  
CRESTVIEW, FL 32539

**New Mailing Address:**

777 BEAL PARKWAY  
FT WALTON BEACH, FL 32547

FEI Number: 59-3443944

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BILLY, BARBARA G  
6447 MOONLIGHT LANE  
CRESTVIEW, FL 32539 US

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

BILLY, BARBARA G  
777 BEAL PARKWAY  
FT WALTON BEACH, FL 32547 US

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

04/18/2011

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: BILLY, FRED C REV  
Address: 777 BEAL PARKWAY  
City-St-Zip: FT WALTON BEACH, FL 32547

Title: D  
Name: BILLY, BARBARA G  
Address: 777 BEAL PARKWAY  
City-St-Zip: FT WALTON BEACH, FL 32547

Title: D  
Name: MCMINN, BONNIE L  
Address: 427 CHURCH ST  
City-St-Zip: MACON, GA 31217

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: BARBARA GAYLE BILLY

D

04/18/2011

Electronic Signature of Signing Officer or Director

Date