## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N9700000630

FILED Jan 18, 2010 Secretary of State

US

01/18/2010

Entity Name: THE SOWERS MINISTRY INC.

Current Principal Place of Business: New Principal Place of Business:

C/O ROGER ABEL
3912 S. OCEAN BLVD.#614
HIGHLAND BEACH, FL 334873335 US

C/O DR. ROGER ABEL
1501 COASTAL BAY BLVD.
BOYNTON BEACH, FL 334873335 US

Current Mailing Address: New Mailing Address:

THE SOWERS MINISTRY INC PO BOX 5148 KINGWOOD, TX 77325

FEI Number: 94-3149727 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ABEL, ROGER
3912 S. OCEAN BLVD., #614
HIGHLAND BEACH, FL 334873335 US

ABEL, ROGER
1501 COASTAL BAY BLVD.
BOYNTON BEACH, FL 33435 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 Date

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: ANDERSON, NEIL
Address: P.O. BOX 5148
City-St-Zip: KINGWOOD, TX 77325

Title: S

Name: THAPA, RAJENDRA
Address: 1520 HOLVEX DR
City-St-Zip: CEDAR HILL, TX 75104

Title: VP

Name: CHESBROUGH, TERRY

Address: P.O. BOX 731

City-St-Zip: GRAPEVINE, TX 76099

Title: M

Name: ANDERSON, MARK Address: PO BOX 66 City-St-Zip: CODY, WY 82414

Title: MBR

 Name:
 ABEL, ROGER DR

 Address:
 1501 COASTAL BAY BLVD.

 City-St-Zip:
 BOYNTON BEACH, FL 33435

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: NEIL ANDERSON PD 01/18/2010