

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003305

FILED
Mar 26, 2008
Secretary of State

Entity Name: THRONE OF GRACE MINISTRIES INC.

Current Principal Place of Business:

1408 55TH AVENUE WEST
BRADENTON, FL 34207

New Principal Place of Business:

Current Mailing Address:

P.O BOX 11256
BRADENTON, FL 342821256 US

New Mailing Address:

FEI Number: 65-0765291

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WOOTEN, STANLEY E
2605 MARTIN ST
SARASOTA, FL 34237 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: P () Delete
Name: WOOTEN, STANLEY E PASTOR
Address: 1408 55TH AVENUE WEST
City-St-Zip: BRADENTON, FL 34207

Title: VP () Delete
Name: WOOTEN, RUTH A PASTOR
Address: 1408 55TH AVENUE WEST
City-St-Zip: BRADENTON, FL 34207

Title: D () Delete
Name: WOOTEN, GERALD
Address: 9607 MIDDLELIDGE CT
City-St-Zip: BRANDYWINE, MD 20613

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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: D () Change (X) Addition
Name: ANDREWS, LEMUEL
Address: 5332 LAKEHURST COURT
City-St-Zip: PALMETTO, FL 34221

Title: D () Change (X) Addition
Name: BEACHY, NANCY
Address: 5178 ROCKING HORSE LANE
City-St-Zip: SARASOTA, FL 34241

Title: D () Change (X) Addition
Name: KNOX, HOMER
Address: 21 NAOMI AVE
City-St-Zip: LANDISVILLE, PA 17538

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: STANLEY WOOTEN

P

03/26/2008

Electronic Signature of Signing Officer or Director

Date