2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2009
Secretary of State

DOCUMENT# N97000004721

Entity Name: COMMON GROUND MINISTRIES, INC.

Current Principal Place of Business:

600 ATLANTIC AVENUE
FORT PIERCE, FL 34950

New Principal Place of Business:

Current Mailing Address:

600 ATLANTIC AVENUE
FORT PIERCE, FL 34950

New Mailing Address:

P.O. BOX 1898
FORT PIERCE, FL 34954

FEI Number: 65-0639941 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, TODD J
600 ATLANTIC AVENUE
FORT PIERCE, FL 34950 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: DP ( ) Delete
Name: SMITH, TODD J
Address: 600 ATLANTIC AVENUE
City-St-Zip: FORT PIERCE, FL 34950

Title: DV ( ) Delete
Name: HARNED, TONY
Address: 5211 OLEANDER AVENUE
City-St-Zip: FORT PIERCE, FL 34982

Title: DST ( ) Delete
Name: SMITH, CLAYTON
Address: 5265 NW NORHT MACEDO BLVD
City-St-Zip: PORT ST LUCIE, FL 34983

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DV (X) Change ( ) Addition
Name: HARNED, TONY
Address: 5904 CITRUS AVENUE
City-St-Zip: FORT PIERCE, FL 34953

Title: DST (X) Change ( ) Addition
Name: SMITH, CLAYTON
Address: 5265 NW NORTH MACEDO BLVD
City-St-Zip: PORT ST LUCIE, FL 34983

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: TODD J SMITH DP 01/23/2009

Electronic Signature of Signing Officer or Director — Date