

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004747

FILED
Apr 20, 2011
Secretary of State

Entity Name: NEW VISION MINISTRIES INTERNATIONAL INC.

Current Principal Place of Business:

1187 SELMA CHURCH ROAD
GRACEVILLE, FL 32440 US

New Principal Place of Business:

Current Mailing Address:

101 LAKEFOREST DRIVE
DOTHAN, AL 36301 US

New Mailing Address:

FEI Number: 72-1344334

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PREVATT, DARLENE
1187 SELMA CHURCH ROAD
GRACEVILLE, FL 32440 US

Name and Address of New Registered Agent:

FOWLER, PATTY
1187 SELMA CHURCH ROAD
GRACEVILLE, FL 32440 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: PATTY FOWLER

04/20/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: WRIGHT, ARTELMA
Address: 3262 STATE HIGHWAY 109
City-St-Zip: DOTHAN, AL 36301 US

Title: V
Name: FOWLER, PAIGE
Address: 714 SOUTHWEST 16TH AVENUE APT 103
City-St-Zip: GAINSVILLE, FL 32601 US

Title: ST
Name: FOWLER, PATTY
Address: 101 LAKEFOREST DR
City-St-Zip: DOTHAN, AL 36301

Title: T
Name: SHIVER, SARAH
Address: 802 OVERLOOK DRIVE
City-St-Zip: DOTHAN, AL 36303

Title: T
Name: MCCORMICK, TOMMY
Address: 7120 CAMPFLOWERS ROAD
City-St-Zip: YOUNGSTOWN, FL 32466 US

Title: T
Name: SHIVER, GASTON
Address: 450 TRI-COUNTY RD
City-St-Zip: GRACEVILLE, FL 32440 US

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: PATTY FOWLER

S/T

04/20/2011

Electronic Signature of Signing Officer or Director

Date