

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 17, 2008
Secretary of State**

DOCUMENT# N98000001209

Entity Name: THE WIND MINISTRIES, INCORPORATED

Current Principal Place of Business:

9013 BOB O' LINK CT
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

2232 CROSS CREEK EST
UNION, MO 63084

New Mailing Address:

FEI Number: 59-3497829 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DUSOE, SUSAN
9013 BOB O' LINK CT
TALLAHASSEE, FL 32312 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: PD () Delete
Name: SAULTER, JAMES A
Address: 2232 CROSS CREEK EST
City-St-Zip: UNION, MO 63084

Title: STD () Delete
Name: SAULTER, CHRISTINE E
Address: 2232 CROSS CREEK EST
City-St-Zip: UNION, MO 63084

Title: D () Delete
Name: RUNNELS, CLAY
Address: 1517 WINDMILL POINTE RD
City-St-Zip: PALM HARBOR, FL 34685

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:

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: JAMES A SAULTER

PD

07/17/2008

Electronic Signature of Signing Officer or Director

_____ Date