

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001700

FILED
Apr 17, 2007
Secretary of State

Entity Name: MCDUFFIE / FRESH START MINISTRIES, INC.

Current Principal Place of Business:

527 PITT ST.
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

527 PITT ST.
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 59-3504887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCDUFFIE, EMMA
527 PITT ST.
CLERMONT, FL 34711 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: MCDUFFIE, EMMA
Address: 527 PITT STREET
City-St-Zip: CLERMONT, FL 34711

Title: VD () Delete
Name: MCDUFFIE, JAMES
Address: 527 PITT STREET
City-St-Zip: CLERMONT, FL 34711

Title: STD () Delete
Name: BARLOW, DELMANETTA
Address: 882 HIGH POINTE CIRCLE
City-St-Zip: CLERMONT, FL 34711

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 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: EMMA MCDUFFIE

PD

04/17/2007

Electronic Signature of Signing Officer or Director

Date