

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001885

FILED  
Apr 27, 2012  
Secretary of State

**Entity Name:** JOHN EDWARDS MINISTRIES, INC.

**Current Principal Place of Business:**

708 HAMMONDVILLE RD  
POMPANO BEACH, FL 33060

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 237  
POMPANO BEACH, FL 33060

**New Mailing Address:**

**FEI Number:** 65-0822598

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

EDWARDS, JOHN  
708 HAMMONDVILLE RD  
POMPANO BEACH, FL 33060 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  
Name: EDWARDS, JOHN  
Address: 708 HAMMONDVILLE RD  
City-St-Zip: POMPANO BEACH, FL 33060

Title: DS  
Name: EDWARDS, MARILYN  
Address: 708 HAMMONDVILLE RD  
City-St-Zip: POMPANO BEACH, FL 33060

Title: DT  
Name: WILLIAMS, BRENDA  
Address: 717 NW 15TH CT  
City-St-Zip: POMPANO BEACH, FL 33060

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: JOHN EDWARDS

DP

04/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date