

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002464

FILED
Apr 22, 2008
Secretary of State

Entity Name: JOHN DAMM MINISTRIES, INC.

Current Principal Place of Business:

4912 SW 90TH AVENUE
COOPER CITY, FL 33328 US

New Principal Place of Business:

Current Mailing Address:

4912 SW 90TH AVENUE
COOPER CITY, FL 33328 US

New Mailing Address:

FEI Number: 65-0831998

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOLNIER, PAUL M
16208 NE 12TH AVE.
NORTH MIAMI BEACH, FL 33162 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: D () Delete
Name: DAMM, JOHN
Address: 4912 SW 90 AVE
City-St-Zip: COOPER CITY, FL 33328

Title: D () Delete
Name: RODRIGUEZ, MANUEL PASTOR
Address: 260 E. 64 ST.
City-St-Zip: HIALEAH, FL 33013

Title: D () Delete
Name: RICE, BILL PASTOR
Address: P.O. BOX 821867
City-St-Zip: SOUTH, FL 33062

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: JOHN DAMM

D

04/22/2008

Electronic Signature of Signing Officer or Director

Date