

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002742

FILED
Apr 10, 2012
Secretary of State

Entity Name: FRUIT OF GLORY MINISTRIES, INC.

Current Principal Place of Business:

1793 W. HILLSBOROUGH AVE.
TAMPA, FL 33603 US

New Principal Place of Business:

3040 W. CYPRESS STREET
STE. 101
TAMPA, FL 33609 US

Current Mailing Address:

1793 W. HILLSBOROUGH AVE.
TAMPA, FL 33603 US

New Mailing Address:

3040 W. CYPRESS STREET
STE. 101
TAMPA, FL 33609 US

FEI Number: 59-3371240

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEGRANDE, SYDEL MD
8608 POINSETTA DRIVE
TAMPA, FL 33637 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
Name: LEGRANDE, SYDEL MD
Address: 8608 POINSETTA DRIVE
City-St-Zip: TAMPA, FL 33637

Title: D
Name: WEBB, CHERYL
Address: 4709 BAY CREST DRIVE
City-St-Zip: TAMPA, FL 33615

Title: VD
Name: LEGRANDE, GEORGE
Address: 8608 POINSETTIA DR
City-St-Zip: TAMPA, FL 33637

Title: D
Name: BARNES-JOHNSON, SYBIL K PHD
Address: 1905 STATE STREET
City-St-Zip: TAMPA, FL 33606

Title: D
Name: HOOVER, KURT L PH.D.
Address: 1202 BLUEFIELD RD.
City-St-Zip: ODESA, FL 33556

Title: D
Name: HOOVER, MELBA N
Address: 1202 BLUEFIELD RD.
City-St-Zip: ODESA, FL 33556

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: SYDEL LEGRANDE, M.D.

PD

04/10/2012

Electronic Signature of Signing Officer or Director

Date