2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003434

Entity Name: GLEN CLARK MINISTRIES, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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127 N.E. FIRST ST. 127 NE FIRST ST.

SATELLITE BEACH, FL 32937 SATELLITE BEACH, FL 32937

Current Mailing Address: New Mailing Address:

PO BOX 1707 127 NE FIRST ST.

PLANT CITY, FL 335641707 SATELLITE BEACH, FL 32937

FEI Number: 59-3552325 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CLARK, GLEN CLARK, GLEN

127 N.É. FIRST STREET 127 NE FIRST STREET

SATELLITE BEACH, FL 32937 US SATELLITE BEACH, FL 32937 US

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: 04/30/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition

 Name:
 CLARK, GLEN
 Name:
 CLARK, GLEN

 Address:
 127 N.E. FIRST STREET
 Address:
 127 NE FIRST STREET

 City-St-Zip:
 SATELLITE BEACH, FL 32937
 City-St-Zip:
 SATELLITE BEACH, FL 32937

Title: DST () Delete Title: () Change () Addition

 Name:
 CLARK, LINDA M
 Name:

 Address:
 127 NE FIRST STREET
 Address:

 City-St-Zip:
 SATELLITE BEACH, FL 32937
 City-St-Zip:

Title: DVP () Delete Title: DVP (X) Change () Addition

Name:JOHNSON, JEÁN EName:JOHNSON, JEÁN EAddress:127 N.E. 1ST ST.Address:127 NE 1ST ST.

City-St-Zip: SATELLITE BEACH, FL 32937 City-St-Zip: SATELLITE BEACH, FL 32937

Title: D () Delete Title: () Change () Addition

 Name:
 KEENEN, MARY J
 Name:

 Address:
 1014 THOMAS RD.
 Address:

 City-St-Zip:
 LAKELAND, FL 33809
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 CLARK, DANIELE J
 Name:

 Address:
 127 N.E. FIRST ST.
 Address:

 City-St-Zip:
 SATELLITE BEACH, FL 32937
 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: LINDA M. CLARK DST 04/30/2009