

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004734

FILED
Mar 24, 2009
Secretary of State

Entity Name: EPIC SURF MINISTRIES, INC.

Current Principal Place of Business:

705 2ND AVE N
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

107 THIRD AVENUE SOUTH
JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

P.O. BOX 50952
JACKSONVILLE BEACH, FL 32240

New Mailing Address:

FEI Number: 59-3551958 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WYATT, JOHN W III
13238 LIAHONA LANE
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

ROSS, MICHAEL C
27 OAKWOOD RD
JACKSONVILLE BEACH, FL 32250 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: MICHAEL C ROSS

03/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SHOTT, DONALD H
Address: 7664 PINNACLE DRIVE
City-St-Zip: JACKSONVILLE, FL 32221

Title: D () Delete
Name: WYATT, JOHN W III
Address: 13238 LIAHONA LANE
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D () Delete
Name: ROSS, MICHAEL C
Address: 27 OAKWOOD ROAD
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D () Delete
Name: OSBORN, DAVID R JR
Address: 1932 STRICKLAND RD
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: D () Delete
Name: STRUDEL, JOHN W
Address: 1535 EVANS DR S
City-St-Zip: JACKSONVILLE BCH, FL

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:

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: MICHAEL C ROSS

D

03/24/2009

Electronic Signature of Signing Officer or Director

Date