

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 24, 2009
Secretary of State**

DOCUMENT# N98000005610

Entity Name: SALVATION MINISTRIES, INC.

Current Principal Place of Business:

37 MOONEY ROAD
FORT WALTON BEACH, FL 32547

New Principal Place of Business:

Current Mailing Address:

37 MOONEY ROAD
FORT WALTON BEACH, FL 32547

New Mailing Address:

FEI Number: 59-3547069 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUGHES, CHRISTIN A
37 MOONEY ROAD
FORT WALTON BEACH, FL 32547 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 () Delete
Name: HUGHES, CHRISTIN A
Address: 37 MOONEY ROAD
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: TD () Delete
Name: HOLGUIN, KERI
Address: 386 GARDNER DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: VD () Delete
Name: HUGHES, CHRISTIN A
Address: 37 MOONEY ROAD
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: SD () Delete
Name: HUGHES, ROBIE V
Address: 37 MOONEY ROAD
City-St-Zip: FORT WALTON BEACH, FL 32547

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:

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: CHRISTIN A HUGHES

PD

04/24/2009

Electronic Signature of Signing Officer or Director

Date