

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 26, 2008  
Secretary of State**

DOCUMENT# N98000005617

Entity Name: TENTMAKER MINISTRIES, INC.

**Current Principal Place of Business:**

4241 S.W. 7TH STREET  
PLANTATION, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

4241 S.W. 7TH STREET  
PLANTATION, FL 33317

**New Mailing Address:**

FEI Number: 65-0868887      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CASONI, RONALD W  
4241 S.W. 7TH STREET  
PLANTATION, FL 33317      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: CASONI, RONALD W  
Address: 4241 S.W. 7TH STREET  
City-St-Zip: PLANTATION, FL 33317

Title: VD      ( ) Delete  
Name: SIBBLE, LAS REV  
Address: 4901 N.W. 12TH COURY  
City-St-Zip: FT. LAUDERDALE, FL 33313

Title: STD      ( ) Delete  
Name: GORDON, DAVID R  
Address: 1940 N.E. 28TH TERRACE  
City-St-Zip: POMPANO BEACH, 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: RONALD W. CASONI

PD

04/26/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date