2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005670

Title:

Name:

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City-St-Zip:

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FT. LAUDERDALE, FL 33313

FIELDS, CHRISTINE

5332 NW 18 ST #3

FILED May 01, 2008 Secretary of State

Entity Name: SOUL WINNING MINISTRY, INC. **Current Principal Place of Business: New Principal Place of Business:** 2515 NW 15 CT. FORT LAUDERDALE, FL 33311 **Current Mailing Address: New Mailing Address:** C/O BISHOP BILL RICE PO BOX 821867 SOUTH FLORIDA, FL 33082 FEI Number: 65-0866750 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RICE, BILL BISHOP 19730 S.W. 12TH ST. PEMBROKE PINES, FL 33029 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition THOMAS, DOROTHY Name: Name: Address: 2515 NW 15 CT Address: City-St-Zip: FORT LAUDERDALE, FL 33311 City-St-Zip: Title: () Delete Title: () Change () Addition Name: RICE, BILL BISHOP Name: Address: 19730 SW 12 ST. Address: City-St-Zip: PEMBROKE PINES, FL 33029 City-St-Zip: Title: () Delete Title: () Change () Addition JONES, WILLIE J BISHOP Name: Name: 2261 NW 58 ST. Address: Address: City-St-Zip: MIAMI, FL 33142 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: BILL RICE D 05/01/2008

() Change () Addition