## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000007211

Entity Name: DAVID HUSKEY MINISTRIES, INC.

**FILED** Apr 19, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Outlett i interput i face of Business.	New I interput I face of Business.

802 SOUTH MAIN STREET 412 ROBBINS STREET SWEETWATER, TN 37874 SWEETWATER, TN 37874

**Current Mailing Address: New Mailing Address:** 

PO BOX 678

SWEETWATER, TN 37874

FEI Number: 59-3552502 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:

THRONSON, FREDDIE PO BOX 10662

PENSACOLA, FL 32524 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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

(X) Change ( ) Addition

DP () Delete HUSKEY, DAVID HUSKEY, DAVID Name: Name: Address: 802 SOUTH MAIN STREET Address: 412 ROBBINS STREET City-St-Zip: SWEETWATER, TN 37874 City-St-Zip: SWEETWATER, TN 37874

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

Name: HUSKEY, ALICIA Name: HUSKEY, ALICIA Address: 802 S. MAIN STREET Address: 412 ROBBINS STREET City-St-Zip: SWEETWATER, TN 37874 City-St-Zip: SWEETWATER, TN 37874

Title: DN () Delete Title: () Change () Addition

SUTTON, JEFF Name: Name: Address: 2967 MCDOWELL ROAD Address: City-St-Zip: LAS CRUCES, NM 88005 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID HUSKEY DP 04/19/2006