2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000806

FILED May 11, 2008 Secretary of State

Entity Name: SOUND DOCTRINE CLINIC MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business:

500 WEST AVERY ST

PENSACOLA, FL 32501 US

Current Mailing Address: New Mailing Address:

PO BOX 17693 500 WEST AVERY ST

PENSACOLA, FL 32501 US PENSACOLA, FL 32501 US

FEI Number: 59-3567080 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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:

PROPHETESS CYNT. C. ADELL PROPHETESS CYNT. C. ADELL

500 WEST AVERY 500 WEST AVERY

PENSACOLA, FL 32522 US PENSACOLA, FL 32501 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: 05/11/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete CEOD (X) Change () Addition

ADELL, PROPHETESS C ADELL, PROPHETESS C Name: Name: P.O. BOX 17693 Address: 500 WEST AVERY ST. Address: City-St-Zip: PENSACOLA, FL 32522-769 3 City-St-Zip: PENSACOLA, FL 325013

Title: Title:

() Delete (X) Change () Addition ADELL, VIRGINIA A Name: ADELL, VIRGINIA A Name:

Address: P.O. BOX 17693 Address: 6051 N 42ND ST. PENSACOLA, FL 325227693 City-St-Zip: City-St-Zip: MILWAUKEE, WI 53209

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

MALLORY, BARBARA K Name: Name:

500 WEST AVERY ST. Address: Address: City-St-Zip: PENSACOLA, FL 32501 City-St-Zip:

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

Name: MILLER, BRENDA Name: BROWN, DOROTHY D Address: 3524 NORTH 12TH STREET Address: 1422 NORTH 7TH AV. City-St-Zip: MILWAUKEE, WI 53206 City-St-Zip: PENSACOLA, FL 32503

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

ADELL, NADIO Name: Name: 6051 N 42ND ST Address: Address: MILWAUKEE, WI 53209 City-St-Zip: City-St-Zip:

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

RANDOLPH, HELEN RANDOLPH, HELEN Name: Name: Address: 2758 N PALMER Address: 2758 N PALMER MILWAUKEE, WI 53212 MILWAUKEE, WI 53212 City-St-Zip: 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: PROPHETESS CYNT C. ADELL CEO 05/11/2008

Electronic Signature of Signing Officer or Director

Date