

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 06, 2009
Secretary of State**

DOCUMENT# N99000003627

Entity Name: SHARING JESUS DAILY MINISTRIES, INC.

Current Principal Place of Business:

1350 KINGFISHER DR
ENGLEWOOD, FL 34224

New Principal Place of Business:

Current Mailing Address:

1350 KINGFISHER DR
ENGLEWOOD, FL 34224

New Mailing Address:

FEI Number: 65-0926773 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:

DAVIS, JAMES E
1350 KINGFISHER DR
ENGLEWOOD, FL 34224 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: P () Delete
Name: DAVIS, JAMES E
Address: 1350 KINGFISHER DR
City-St-Zip: ENGLEWOOD, FL 34224

Title: V () Delete
Name: DAVIS, JAMES R
Address: 4326 WEST MAIN STREET
City-St-Zip: WAUCHULA, FL 33873

Title: TS () Delete
Name: DAVIS, SHIRLEY J
Address: 1350 KINGFISHER DR
City-St-Zip: ENGLEWOOD, FL 34224

Title: D () Delete
Name: BERLIN, SUZANNE
Address: 88 JACOBS ROAD SOUTH EAST
City-St-Zip: HUBBARD, OH 44425

Title: D () Delete
Name: HAMEL, ROBERT & HARRIET
Address: 1353 KINGFISHER DR
City-St-Zip: ENGLEWOOD, FL 34224

Title: D () Delete
Name: CHILDERS, LEONARD
Address: 4810 HWY 72 N.W. LOT 222
City-St-Zip: ALCADIA, FL 34266

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
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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: JAMES E. DAVIS

P

05/06/2009

Electronic Signature of Signing Officer or Director

_____ Date