## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000004461

FILED Jun 19, 2009 Secretary of State

Entity Name: SWEET WATER MINISTRY, INC.

	Principal Place of Business:	new i illicipal r	lace of Business:
	E. 67TH PLACE ON, FL 32668		
Current N	Mailing Address:	New Mailing Ad	dress:
	E. 67TH PLACE ON, FL 32668		
In accordar	r: 59-3433317 FEI Number Applied For() FEI nce with s. 607.193(2)(b), F.S., the corporation did not recei d Address of Current Registered Agent:		Certificate of Status Desired (X)
11950 S.E	IIRLEY ANN E. 67TH PLACE DN, FL 32668 US		
	e named entity submits this statement for the purpos e of Florida.	se of changing its regi	stered office or registered agent, or both
SIGNATU	RE:		
	Electronic Signature of Registered Agent		Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CH	ANGES TO OFFICERS AND DIRECTO
Title: Name: Address:	DP () Delete HULL, SHIRLEY ANN 11950 S.E. 67TH PLACE MORRISTON, FL 32668	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
City-St-Zip:	WORKHOTOR, TE GEGGG	Oity Ot Zip.	
City-St-Zip: Title: Name: Address: City-St-Zip:	DT () Delete HULL, WILLIAM 11950 S.E. 67TH PLACE MORRISTON, FL 32668	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address:	DT () Delete HULL, WILLIAM 11950 S.E. 67TH PLACE	Title: Name: Address:	( ) Change ( ) Addition ( ) Change ( ) Addition
Title: Name: Address: City-St-Zip: Title: Name: Address:	DT () Delete HULL, WILLIAM 11950 S.E. 67TH PLACE MORRISTON, FL 32668  BDS () Delete MARTIN, CLEAN 30 SW 3RD ST P.O. 22	Title: Name: Address: City-St-Zip: Title: Name: Address:	· · · · · · · · · · · · · · · · · · ·
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	DT () Delete HULL, WILLIAM 11950 S.E. 67TH PLACE MORRISTON, FL 32668  BDS () Delete MARTIN, CLEAN 30 SW 3RD ST P.O. 22 OTTER CREEK, FL 32683  BD (X) Delete FREEMAN, ALFREDA 610 PICNIC ST	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	( ) Change ( ) Addition

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: SHIRLEY ANN HULL RA 06/19/2009