

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005287

FILED  
May 05, 2012  
Secretary of State

**Entity Name:** COLEMAN MINISTRIES, INC.

**Current Principal Place of Business:**

96483 CALHOUN ROAD  
FERNANDINA BEACH, FL 32034

**New Principal Place of Business:**

**Current Mailing Address:**

96483 CALHOUN ROAD  
FERNANDINA BEACH, FL 32034

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COLEMAN, THOMAS  
96483 CALHOUN ROAD  
FERNANDINA BEACH, FL 32034 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: PD  
Name: COLEMAN, THOMAS  
Address: 96483 CALHOUN ROAD  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: SD  
Name: HARDY, CYNTHIA  
Address: 712 DIVISION ST.  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: TD  
Name: COLEMAN, LARRY  
Address: 3630 BAKERS DRIVE  
City-St-Zip: YULEE, FL 32097

I hereby 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 all other like empowered.

**SIGNATURE:** THOMAS COLEMAN

PRES

05/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date