2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Jan 31, 2007 8:00 am Secretary of State DOCUMENT # N9900006197 1. Entity Name 01-31-2007 90047 027 ****70.00 GREAT IS THE LORD MINISTRIES, INC. Principal Place of Business Mailing Address 132 N NOVA RD. POST OFFICE BOX 10131 DAYTONA BEACH FL 32114 DAYTONA BEACH FL 32120-0131 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 59-3603544 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KEARSE, JAMES L SR. 1003 ALICE DRIVE Street Address (P.O. Box Number is Not Acceptable) DAYTONA BEACH FL 32117-3925 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. D IIILE Delete TITLE Addition Ronald Smith NAME DURDEN, STEVEN NAM STREET ADDRESS 507 FREMONT AVENUE STREET ADDRESS 1000 15th Street CITY - ST- ZIP CITY+S1+ZIP DAYTONA BEACH FL 32114 ши Delete DILLE Change ☐ Addition NAME JOHNSON, LARRY NAME STREET ADDRESS 624 SCHOOL STREET STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH FL 32114 CITY-ST-7P HILL Delete D Change ☐ Addition NAME WILLIAMS, VIRGIN STREET ADDRESS STREET ADDRESS 100 APT 5 KENNY ROAD CHY-ST-7IP CHY-ST-ZIP DAYTONA BEACH FL HILE ☐ Defete THUE Change Addition NAME NAME STREET ADORESS STRUET ADDRESS CITY-ST-ZIP CHY-ST-7IP THILE ☐ Delete HIH ☐ Addition ☐ Change NAME NAMI STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY ST-ZIP HILE ☐ Defete ШП ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-7IP CITY-S1-7IP 12. I hereby cortify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this teport as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attackment with an address, with all other like/empgivered.

FILED