

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90746 001 ***150.00

05-01-2006 90746 002 *****8.75

DOCUMENT # P01000037958

1. Entity Name
SHEWBREAD MINISTRIES, INC.



Principal Place of Business
**7157 PEMBROKE ROAD
PEMBROKE PINES, FL 33023**

Mailing Address
**2241 S. SHERMAN CIRCLE
#C-215
MIRAMAR, FL 33025**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03222006 Chg-P CR2E034 (11/05)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

— 6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ANDERSON, RHONDA
2241 S. SHERMAN CIRCLE
SUITE #C-215
MIRAMAR, FL 33025**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Rhonda Anderson *Rhonda Anderson (President)*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) *Director*

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME ANDERSON, RHONDA
STREET ADDRESS 2241 SHERMAN CIRCLE SO. C215
CITY-ST-ZIP MIRAMAR, FL 33025

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☒ Delete
NAME ANDERSON, EDWARD
STREET ADDRESS 2241 SHERMAN CIRCLE SO. C215
CITY-ST-ZIP MIRAMAR, FL 33025

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME ROBINSON, TOSHA
STREET ADDRESS 2001 PRAIRIE DUNESVILLE CIR (Address correction)
CITY-ST-ZIP LAKE WORTH, FL 33463

TITLE S ☒ Change ☐ Addition
NAME Tosha Robinson
STREET ADDRESS 2001 Prairie Dunes Village Circle
CITY-ST-ZIP Lake Worth, FL 33463

TITLE T ☐ Delete
NAME JOYNER, NATHALIE
STREET ADDRESS 2241 SHERMAN CIRCLE S, C 215
CITY-ST-ZIP MIRAMAR, FL 33025

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Rhonda Anderson* *Rhonda Anderson* 3/21/06

954-436-0956
754-423-1113