

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 07, 2008 08:00 AM
Secretary of State

DOCUMENT # P11374

1. Entity Name
KIRK & PATTI MINISTRIES, INC.



Principal Place of Business
**405 PLUMOSA DR. (SANFORD, FL.)
P.O. BOX 520106
LONGWOOD, FL 32752-0106**

Mailing Address
**405 PLUMOSA DR. (SANFORD, FL.)
P.O. BOX 520106
LONGWOOD, FL 32752-0106**



04302008 No Chg-NP

CR2E037 (4/06)

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4. FEI Number

42-1182254

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**LYTLE, KIRK
405 PLUMOSA DR.
SANFORD, FL 32771**

**DO NOT WRITE
IN THIS SPACE**

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 _____

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000949466
06/03/08-80030-011 61.25

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	LYTLE, KIRK
STREET ADDRESS	405 PLUMOSA DR.
CITY-ST-ZIP	SANFORD, FL
TITLE	TVD
NAME	LYTLE, PATTI
STREET ADDRESS	405 PLUMOSA DR.
CITY-ST-ZIP	SANFORD, FL
TITLE	T
NAME	KOSKEY, VALERIE
STREET ADDRESS	405 PLUMOSA DR
CITY-ST-ZIP	SANFORD, FL 32771
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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 617, 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.

C. Kirk Lytle

4/30/08