

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000470

FILED  
Jan 28, 2011  
Secretary of State

Entity Name: FRESHOPE MINISTRIES, INC.

**Current Principal Place of Business:**

130 NORTH FLORIDA AVENUE  
INVERNESS, FL 34453 US

**New Principal Place of Business:**

1020 NORTH CHRISTY WAY  
INVERNESS, FL 34453 US

**Current Mailing Address:**

130 NORTH FLORIDA AVENUE  
INVERNESS, FL 34453 US

**New Mailing Address:**

1020 NORTH CHRISTY WAY  
INVERNESS, FL 34453 US

FEI Number: 26-1758149

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SALLEE', DONNA R  
9072 EAST KINGSPORT LANE  
INVERNESS, FL 34450 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: P  
Name: SALLEE', DONNA R  
Address: 9072 EAST KINGSPORT LANE  
City-St-Zip: INVERNESS, FL 34450 US

Title: VP  
Name: SALLEE', PAUL G  
Address: 9072 EAST KINGSPORT LANE  
City-St-Zip: INVERNESS, FL 34450 US

Title: O  
Name: KREHLING, LINDA  
Address: 2755 68TH STREET SW  
City-St-Zip: NAPLES, FL 34105 US

Title: O  
Name: BIERLY, JEANNIE  
Address: 918 QUAILRIDGE CT.  
City-St-Zip: JACKSONVILLE, FL 32065 US

Title: SEC  
Name: TAYLOR, CINDY  
Address: P O BOX 1402  
City-St-Zip: CHEROKEE, NC 28719 US

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: DONNA R SALLEE'

PRES

01/28/2011

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

\_\_\_\_\_  
Date