

Jason Kander Secretary of State
 2016-2017 BIENNIAL REGISTRATION REPORT
 NONPROFIT

N00728404
Date Filed: 6/21/2016
Jason Kander
Missouri Secretary of State

I ELECT TO FILE A BIENNIAL REGISTRATION REPORT

* SECTION 1, 3 & 4 ARE REQUIRED

<input type="text" value="REPORT DUE BY: 8/31/2016"/>		ORGANIZED UNDER THE LAWS OF: Missouri		
N00728404 Steve Gray Ministries, Inc. STEVE GRAY 605 N.W. RIVEN ROCK TRAIL LEES SUMMIT MO 64081		PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS: * 605 NW Riven Rock Trail (Required) STREET Lees Summit MO 64081 CITY / STATE ZIP		
<p>If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.</p> <p><input type="checkbox"/> The new registered agent _____</p> <p>IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.</p> <p><input type="checkbox"/> The new registered office address _____</p> <p>Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.</p>				
OFFICERS NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST PRESIDENT AND SECRETARY BELOW		BOARD OF DIRECTORS NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST AT LEAST THREE DIRECTORS BELOW		
A PRESIDENT STREET CITY/STATE/ZIP SECRETARY STREET CITY/STATE/ZIP STREET CITY/STATE/ZIP STREET CITY/STATE/ZIP	B NAME Thomason, Eric STREET 605 NW Riven Rock Trail NAME Lee's Summit MO 64081 NAME McSpadden, Marian STREET 605 NW Riven Rock Trl NAME Lees Summit MO 64081 NAME Hill, Rebecca STREET 605 NW Riven Rock Trail NAME Lee's Summit MO 64081			
	NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED			
	The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 576.060 RSMo. Photocopy or stamped signature not acceptable.			
	4 Authorized party or officer sign here		KATHY GRAY (Required)	
	Please print name and title of signer:		KATHY GRAY / Vice President	NAME TITLE
	REGISTRATION REPORT FEE IS: \$20.00 If filed on or before 8/31/2016 \$25.00 If filed after 9/30/2016		WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE	
Corporation will be administratively dissolved if report is not filed by 11/29/2018				
E-MAIL ADDRESS (OPTIONAL): _____				