2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#715514

Entity Name: ST. JOHN MINISTRIES, INC.

FILED Apr 27, 2004 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Plac	New Principal Place of Business:	
3401 25TH TAMPA, F	H AVENUE FL 33605				
Current N	lailing Addre	ess:	New Mailing Addre	New Mailing Address:	
3401 25TH TAMPA, F	H AVENUE FL 33605				
FEI Number	r: 59-1275326	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
PARKER, 2004 S. 58 TAMPA, F	3TH ST. EL 33619				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its register	red office or registered agent, or both,	
SIGNATU	RE:				
		onic Signature of Registered Age	ent	Date	
OFFICER	S AND DIRE	CTORS:	ADDITIONS/CHANG	GES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D (NEWKIRK, EI 2027 16 STRI ST. PETESBU	EET SOUTH	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (GREEN, EDD 6508 SEAFAII TAMPA, FL 3	RER DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (PARKER, TOI 2004 S. 58TH TAMPA, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD (MUNGIN, ALB 4239 E. EMM TAMPA, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S (LANIER, SHIF 3110 27TH AV TAMPA, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (LANE, LERO) 4519 CHESTI TAMPA, FL		Title: Name: Address: Citv-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: EDDIE GREEN D 04/27/2004