2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003482

SWAGGART, FRANCES

17575 HIGHLAND ROAD

BATON ROUGE, LA 70810

Name:

Address:

City-St-Zip:

FILED Jan 05, 2004 Secretary of State

Entity Name: JIMMY SWAGGART MINISTRIES, INC. **Current Principal Place of Business: New Principal Place of Business:** 8819 WORLD MINISTRY AVENUE 8919 WORLD MINISTRY AVENUE BATON ROUGE, LA 70810 BATON ROUGE, LA 70810 **Current Mailing Address: New Mailing Address:** P.O. BOX 262550 BATON ROUGE, LA 708262550 FEI Number: 72-1222084 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATE ACCESS, INC. 236 EAST 6TH AVENUÉ TALLAHASSEE, FL 32303 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SWAGGART, JIMMY Name: Name: Address: 17575 HIGHLAND ROAD Address: City-St-Zip: BATON ROUGE, LA 70810 City-St-Zip: Title: () Delete Title: (X) Change () Addition SWAGGART, DONNIE Name: Name: SWAGGART, DONNIE Address: 17575 HIGHLAND ROAD Address: 17565 HIGHLAND ROAD City-St-Zip: BATON ROUGE, LA 70810 City-St-Zip: BATON ROUGE, LA 70810 Title: () Delete Title: () 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.

Name:

Address:

City-St-Zip:

SIGNATURE: JIMMY L. SWAGGART **PRES** 01/05/2004