

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 07, 2004  
Secretary of State**

DOCUMENT# N00000000710

Entity Name: TAG TEAM MINISTRIES, INC.

**Current Principal Place of Business:**

2603 SPARKMAN ROAD  
PLANT CITY, FL 33566

**New Principal Place of Business:**

**Current Mailing Address:**

2603 SPARKMAN ROAD  
PLANT CITY, FL 33566

**New Mailing Address:**

FEI Number: 59-3743144      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ROGERS, MARTY  
2603 SPARKMAN ROAD  
PLANT CITY, FL 33566      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: PCEO      ( ) Delete  
Name: ROGERS, MARTY  
Address: 2603 SPARKMAN ROAD  
City-St-Zip: PLANT CITY, FL 33566

Title: VPD      ( ) Delete  
Name: ROGERS, RANDY  
Address: 2603 SPARKMAN ROAD  
City-St-Zip: PLANT CITY, FL 33566

Title: D      ( ) Delete  
Name: CONNER, LARRY  
Address: PO BOX 864  
City-St-Zip: DOVER, FL 33527

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP      ( ) Change (X) Addition  
Name: HACKNEY, RICHARD V  
Address: POB 954,  
City-St-Zip: HANCEVILLE, AL 35077

Title: VP      ( ) Change (X) Addition  
Name: BEASLEY, JIMMIE L  
Address: POB 781,  
City-St-Zip: BLAIRSVILLE, GA 30514

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: MARTY ROGERS

PRES

01/07/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date