2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001516

Entity Name: SEEKING HEART MINISTRIES, INC.

FILED May 01, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: TALLAHASSEE, FL 323175322 **Current Mailing Address: New Mailing Address:** PO BOX 15322 TALLAHASSEE, FL 323175322 FEI Number: 59-3719940 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: TUTTLE, RON TUTTLE, RON 10006 JÓURNEYS END 2003 WINTHROP WAY TALLAHASSEE, FL 32312 US US TALLAHASSEE, FL 32308 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: 05/01/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete TUTTLE, RON Name: Name: Address: 2003 WINTHROP WAY Address: City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip: Title: Title: () Delete () Change () Addition Name: TUTTLE, TANA Name: Address: 2003 WINTHROP WAY Address: City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip: Title: () Delete Title: () Change () Addition JENSEN, SHARON Name: Name: 2692 SPRING LAKE RD Address: Address: City-St-Zip: JACKSONVILLE, FL 32210 City-St-Zip: () Delete Title: Title: () Change () Addition HUTCHINSON, JANET Name: Name: 1405 DEVONSHIRE CT. Address: Address: City-St-Zip: TALLAHASSEE, FL 32311 City-St-Zip: Title: Title: () Delete () Change () Addition CRUCE, JANICE Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: RON TUTTLE D 05/01/2004

3241 BEAUMONT DR.

TALLAHASSEE, FL 32312

Address: City-St-Zip: