2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2007
Secretary of State

DOCUMENT# N04000006635

Entity Name: THE TIME HAS COME MINISTRIES INC.

Current Principal Place of Business:

P.O. BOX 8654
PORT SAINT LUCIE, FL 349858654

New Principal Place of Business:

1020 SW LIBERTY AVE
PORT SAINT LUCIE, FL 34953

Current Mailing Address:

P.O. BOX 8654
PORT SAINT LUCIE, FL 349858654

New Mailing Address:

1020 SW LIBERTY AVE
PORT SAINT LUCIE, FL 34953

FEI Number: 83-0401577 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OROZCO, LESLIE
1020 SW LIBERTY AVENUE
PORT SAINT LUCIE, FL 34953 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: P ( ) Delete
Name: OROZCO, LESLIE
Address: 1020 SW LIBERTY AVE
City-St-Zip: PORT SAINT LUCIE, 34

Title: V ( ) Delete
Name: OROZCO, MARILYN
Address: 1020 SW LIBERTY AVE
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: ST ( ) Delete
Name: RODRIGUEZ, ANTONIA
Address: 11821 SW 185 TR
City-St-Zip: MIAMI, FL 33177

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: LESLIE OROZCO P 01/09/2007

Electronic Signature of Signing Officer or Director — Date