2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010763

FILED Mar 25, 2005 Secretary of State

Entity Na	me: TREVOR	MINISTRIES, INC.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
3110 NW 211 STREET AVE MIAMI, FL 33056				3271 NW 103 TERRACE SUNRISE, FL 33351		
Current Mailing Address:			New Maili	New Mailing Address:		
3110 NW 211 STREET AVE MIAMI, FL 33056				3271 NW 103 TERRACE SUNRISE, FL 33351		
FEI Number	FEI Number: 01-0824477 FEI Number Applied For ()		FEI Number Not App	licable () Cert	ificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
JONES, W 2261 NW ! MIAMI, FL	58TH STREET					
	named entity e of Florida.	submits this statement for the p	ourpose of changing	ts registered office	or registered agent, or both,	
SIGNATU	RE:					
	Electror	nic Signature of Registered Age	ent		Date	
OFFICER	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () WALLACE, TRI 3271 NW 103R SUNRISE, FL	D TERR	Title: Name: Address: City-St-Zip:	P (X) Chan WALLACE, TREVOR 3271 NW 103RD TER SUNRISE, FL 33351	ge () Addition	
Title: Name: Address: City-St-Zip:	JACKSON, VAL 3900 NW 47TH		Title: Name: Address: City-St-Zip:	()Chan	ge () Addition	
Title: Name: Address: City-St-Zip:	D () JONES, WILLII 2261 NW 58TH MIAMI, FL 331	STREET	Title: Name: Address: City-St-Zip:	()Chan	ge () Addition	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: Citv-St-Zip:	V/P () Chan WALLACE, LORETTA 3271 NW 103RD TER SUNRISE, FL 33351		

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: WILLIE J. JONES D 03/25/2005