

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003099

FILED  
Apr 29, 2006  
Secretary of State

Entity Name: MEN IN KNEAD MINISTRY, INC.

**Current Principal Place of Business:**

1043 COBBLESTONE AVE  
DELTONA, FL 32725

**New Principal Place of Business:**

**Current Mailing Address:**

1043 COBBLESTONE AVE  
DELTONA, FL 32725

**New Mailing Address:**

FEI Number: 73-1732450

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

PALMER, JOSEPH KENNETH  
1043 COBBLESTONE AVE  
DELTONA, FL 32725 US

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

PALMER, JOSEPH K REV  
1043 COBBLESTONE AVE  
DELTONA, FL 32725 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: REV JOSEPH K PALMER

04/29/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: PALMER, JOSEPH KENNETH  
Address: 1043 COBBLESTONE AVE  
City-St-Zip: DELTONA, FL 32725

Title: D ( ) Delete  
Name: PALMER, DEBORAH V  
Address: 1043 COBBLESTONE AVE  
City-St-Zip: DELTONA, FL 32725

Title: D ( ) Delete  
Name: BAYO, DAYRON E  
Address: 2400 NORTH FORSYTH RD STE 110  
City-St-Zip: ORLANDO, FL 32807

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

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

Title: D (X) Change ( ) Addition  
Name: PALMER, JOSEPH K REV  
Address: 1043 COBBLESTONE AVE  
City-St-Zip: DELTONA, FL 32725

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

Title: T (X) Change ( ) Addition  
Name: WALTER, KEITH A  
Address: 1633 COURTLAND BLVD  
City-St-Zip: DELTONA, FL 32738

Title: T ( ) Change (X) Addition  
Name: ROURA, VICTORIA M  
Address: 23 LUPINE #6  
City-St-Zip: DEBARY, FL 32713

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: DEBORAH V PALMER

D

04/29/2006

Electronic Signature of Signing Officer or Director

Date