

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003484

FILED
Jul 07, 2005
Secretary of State

Entity Name: BREAD OF LIFE CHRISTIAN CENTER MINISTRIES, INC.

Current Principal Place of Business:

9222 W ATLANTIC BLVD
1337
CORAL SPRINGS, FL 33071 US

New Principal Place of Business:

25 NE 2ND AVENUE
DEERFIELD BEACH, FL 33441 US

Current Mailing Address:

P. O. BOX 405
DEERFIELD BEACH, FL 33443 US

New Mailing Address:

FEI Number: 59-2395775 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BOWLES, GEORGE M
9222 W ATLANTIC BLVD
1337
CORAL SPRINGS, FL 33071 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: BOWLES, GEORGE M
Address: 9222 W ATLANTIC BLVD
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: D () Delete
Name: BOWLES, JESTINA
Address: 9222 W ATLANTIC BLVD
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: D () Delete
Name: GILLION, EDDIE A
Address: 613 NW 2 TERR
City-St-Zip: DEERFIELD BEACH, FL 33441

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 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: GEORGE M BOWLES

DC

07/07/2005

Electronic Signature of Signing Officer or Director

Date