2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005624

FILED Jan 06, 2004 Secretary of State

Entity Name: CREATION WORLDVIEW MINISTRIES, INC.

Current Principal Place of Business:		New Principal Place of Business:		
698 HAL RLAND(L RD O, FL 32817			
Current Mailing Address:		New Mailing Address:		
698 HAL RLAND	L RD O, FL 32817			
El Number	r: 59-3279970	FEI Number Applied For()	FEI Number Not Applicab	e () Certificate of Status Desired ()
lame and	d Address of C	Current Registered Agent:	Name and Ad	dress of New Registered Agent:
698 HAL	RY, GRADY S L RD D, FL 32817	DR.		
	e named entity : e of Florida.	submits this statement for the	purpose of changing its re	gistered office or registered agent, or both,
the Stat	e of Florida.	submits this statement for the	purpose of changing its re	gistered office or registered agent, or both,
the Stat	e of Florida. RE:	submits this statement for the		gistered office or registered agent, or both, Date
the Stat	e of Florida. RE:	nic Signature of Registered A	gent	
the Stat IGNATU FFICER tle: ame: ddress:	e of Florida. RE: Electror S AND DIREC	nic Signature of Registered Ag T ORS:) Delete GRADY S	gent	Date
the Stat IGNATU FFICER ttle: ame: ddress: tty-St-Zip: ttle: ame: ddress:	e of Florida. RE: Electror S AND DIREC D () MCMURTRY, G 4698 HALL RD ORLANDO, FL	nic Signature of Registered Age FTORS:) Delete BRADY S 32817) Delete AS L WAY EAST	gent ADDITIONS/C Title: Name: Address:	Date HANGES TO OFFICERS AND DIRECTOR
the Stat	e of Florida. RE: Electror S AND DIREC D () MCMURTRY, G 4698 HALL RD ORLANDO, FL D () HENRY, THOM 3073 FLORAL APOPKA, FL 3 D () CONTE, VINCE	nic Signature of Registered Age FTORS:) Delete GRADY S 32817) Delete AS L WAY EAST 52703) Delete ENT M SYBELIA DRIVE	gent ADDITIONS/C Title: Name: Address: City-St-Zip: Title: Name: Address:	Date HANGES TO OFFICERS AND DIRECTO! () Change () Addition

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: GRADY S. MCMURTRY D 01/06/2004