

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 08, 2004  
Secretary of State**

DOCUMENT# N97000004490

Entity Name: BREAD OF LIFE HOO MINISTRIES, INC.

**Current Principal Place of Business:**

1010 WEST SECOND STREET  
RIVIERA BEACH, FL 33404

**New Principal Place of Business:**

**Current Mailing Address:**

1010 WEST SECOND STREET  
RIVIERA BEACH, FL 33404

**New Mailing Address:**

FEI Number: 65-0772982      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

POWELL, SHIRLEY  
1010 WEST SECOND STREET  
RIVIERA BEACH, FL 33404

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

WHITE, SHIRLEY  
1010 WEST SECOND STREET  
RIVIERA BEACH, FL 33404

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: SHIRLEY WHITE      05/08/2004  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: WHITE, SHIRLEY  
Address: 1010 WEST SECOND STREET  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: D      ( ) Delete  
Name: POWELL, WILL  
Address: 452 DATE PALM DRIVE  
City-St-Zip: LAKE PARK, FL 33403

Title: D      ( ) Delete  
Name: FICKLIN, LULA  
Address: 1010 WEST SECOND STREET  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: D      ( ) Delete  
Name: GUSSIE, LAWRENCE  
Address: 717 W. KALMIA  
City-St-Zip: LAKE PARK, FL 33403

Title: D      ( ) Delete  
Name: HICKS, ALPHONSO  
Address: 3349 AUBURN RD  
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: D      ( ) Delete  
Name: MILTON, MIRIAM  
Address: 5353 STACY ROAD  
City-St-Zip: WEST PALM BEACH, FL 33417

**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:

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: SHIRLEY WHITE      MRS.      05/08/2004  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date