2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003434

Current Principal Place of Business:

Entity Name: GLEN CLARK MINISTRIES, INC.

FILED Apr 15, 2005 Secretary of State

3110 SO. TURKEY CREEK RD. PLANT CITY, FL 335662069

Current Mailing Address: New Mailing Address:

3110 SO. TURKEY CREEK RD. PLANT CITY, FL 335662069

FEI Number: 59-3552325 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CLARK, GLEN 3110 SO. TURKEY CREEK RD. PLANT CITY, FL 335662069 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

New Principal Place of Business:

Title: DP () Delete Title: () Change () Addition

 Name:
 CLARK, GLEN
 Name:

 Address:
 3110 SO. TURKEY CREEK RD.
 Address:

 City-St-Zip:
 PLANT CITY, FL 335662069
 City-St-Zip:

Title: DST () Delete Title: () Change () Addition

 Name:
 CLARK, LINDA M
 Name:

 Address:
 3110 SO. TURKEY CREEK RD.
 Address:

 City-St-Zip:
 PLANT CITY, FL 335662069
 City-St-Zip:

Title: DVP () Delete Title: () Change () Addition

 Name:
 JOHNSON, JEAN E
 Name:

 Address:
 127 N.E. 1ST ST.
 Address:

 City-St-Zip:
 SATELLITE BEACH, FL 32937
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 KEENEN, MARY J
 Name:

 Address:
 2736 DERBYSHIRE AVE
 Address:

 City-St-Zip:
 LAKELAND, FL 33803
 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: GLEN CLARK PRES 04/15/2005