## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000001507

Entity Name: FOR GOD'S GLORY MINISTRIES INC.

FILED Apr 25, 2006 Secretary of State

y		BO CECRT WIII VIOTALES, II VC.					
Current Principal Place of Business:				New Principal Place of Business:			
11059 LOSCO PINES COURT JACKSONVILLE, FL 32257				3320 BURGANDY BRANCH DR ORANGE PARK, FL 32065			
Current M	lailing Addres	ss:	New Mai	New Mailing Address:			
	SCO PINES CO IVILLE, FL 322			3320 BURGANDY BRANCH DRIVE ORANGE PARK, FL 32065			
FEI Number	: 52-2310856	FEI Number Applied For()	FEI Number Not Ap	plicable ( )	Certificate of Status Desired ( )	ı	
Name and	Address of (	Current Registered Agent:	Name an	d Address of	New Registered Agent:		
FERRANTI, JOHN L 11059 LOSCO PINES COURT JACKSONVILLE, FL 32257 US				FERRANTI, JOHN L 3320 BURGANDY BRANCH DRIVE ORANGE PARK, FL 32065 US			
	e named entity e of Florida.	submits this statement for the p	urpose of changing	j its registered	d office or registered agent, or b	oth,	
SIGNATURE:				04/25/2006			
	Electro	nic Signature of Registered Age	ent		Date	_	
OFFICERS AND DIRECTORS:				NS/CHANGE	S TO OFFICERS AND DIREC	TORS:	
Title: Name: Address: City-St-Zip: Title:	FERRANTI, JO 11059 LOSCO JACKSONVILL	PINES COURT E, FL 32257	Title: Name: Address: City-St-Zip: Title:	FERRANTI, 3320 BURGA ORANGE PA	NDY BRANCH DRIVE RK, FL 32065		
Name: Address: City-St-Zip:	FERRANTI, SC	PINES COURT	Name: Name: Address: City-St-Zip:	FERRANTI, \$	(X) Change()Addition SOPHIA L NDY BRANCH DRIVE RK, FL 32065		
Title: Name: Address: City-St-Zip:	CHAMBERLIN,	IN WOODS DR. N	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	CASTRO, BILL CALLE 8 # 7-4		Title: Name: Address: City-St-Zip:		()Change ()Addition		
Title: Name: Address: City-St-Zip:	T ( PENA, JIM 12428 TEAL R JACKSONVILL		Title: Name: Address: City-St-Zip:		()Change ()Addition		

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: JOHN FERRANTI P 04/25/2006