2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009731

Entity Name: DIVINE PURPOSE MINISTRIES, INC.

FILED Aug 12, 2006 Secretary of State

P O BOX 741912

BOYNON BEACH, FL 33474

Current Mailing Address: New Mailing Address:

P O BOX 741912

BOYNON BEACH, FL 33474

FEI Number: 03-0565169 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:

MONTAGUE, KIRK MONTAGUE, KIRK A

9944 - A 61ST WAY SOUTH 9944 - A 61ST WAY SOUTH

BOYNTON BEACH, FL 33437 US BOYNTON BEACH, FL 33437 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: KIRK MONTAGUE 08/12/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: MONTAGUE, KIRK A Name: MONTAGUE, KIRK A

 Address:
 9944 - A 61ST WAY SOUTH
 Address:
 9944 - A 61ST WAY SOUTH

 City-St-Zip:
 BOYNTN BEACH, FL 33437
 City-St-Zip:
 BOYNTON BEACH, FL 33437

Title: VP () Delete Title: VP/T (X) Change () Addition Name: CROMEY, JAMES Name: MONTAGUE, GRACE M Address: 1146 BELMORE TERRACE Address: 9944 - A 61ST WAY SOUTH

City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: BOYNTON BEACH, FL 33437

Title: T () Delete Title: S (X) Change () Addition

Name:TROWERS, JACQUELINEName:HOGUE, LINDAAddress:7191 IVY CROSSING LNAddress:3520 SANPIPER DRIVE APT. 9

City-St-Zip: BOYNTON BEACH, FL 33436 City-St-Zip: BOYNTON BEACH, FL 33436

 Title:
 S
 (X) Delete
 Title:
 () Change () Addition

 Name:
 BANGO, GRACE
 Name:

 Address:
 9944-A 61ST WAY SOUTH
 Address:

 City-St-Zip:
 BOYNTON BEACH, FL 33437
 City-St-Zip:

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: KIRK MONTAGUE P 08/12/2006