2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725292

City-St-Zip:

ORLANDO, FL 328073323

FILED Feb 17, 2005 Secretary of State

Entity Name: FLORIDA CHURCH OF GOD MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business:

211 PRESIDENTS DRIVE 2225 EAST EDGEWOOD DRIVE, SUITE 7 LAKE WALES, FL 33859 US

LAKELAND, FL 33803

Current Mailing Address: New Mailing Address:

P O BOX 192 2225 EAST EDGEWOOD DRIVE, SUITE 7

LAKE WALES, FL 33859 US LAKELAND, FL 33803 US

FEI Number: 59-1675074 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WIENS, GREGORY WIENS, GREG

5061 HIGHLANDS BY THE LAKES DRIVE 5061 HIGHLANDS BY THE LAKE DRIVE

LAKELAND, FL 33813 US LAKELAND, FL 33813

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: GREGORY WIENS 02/17/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

City-St-Zip:

LAKELAND, FL 33813 US

() Delete (X) Change () Addition

KUFELDT, STEVEN WIENS, GREGORY Name: Name: 431 N. SEMORAN BLVD. Address: 5061 HIGHLANDS BY THE LAKE DRIVE Address:

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

ABNEY, ANCIL L Name: ABNEY, ANCIL Name: Address: 7835 48TH AVE. E. Address: 7835 48TH AVENUE EAST

City-St-Zip: BRADENTON, FL 34203 City-St-Zip: BRADENTON, FL 34203 US

Title: () Delete Title: VC. (X) Change () Addition DOVE, TOMMY J BELL, RONALD Name: Name:

483 SPRUCEVIEW DR. 2864 1ST AVENUE SOUTH Address: Address: City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: SAINT PETERSBURG, FL 33705 US

(X) Change () Addition Title: Title: () Delete WIENS, GREG Name: Name: KUFELDT, STEVEN

5061 HIGHLANDS BY LAKE DRIVE 431 NORTH SEMORAN BOULEVARD Address: Address:

City-St-Zip: LAKELAND, FL 33813 City-St-Zip: ORLANDO, FL 32857 US

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

FASEL, TERRY FALCHETTI, ERICA Name: Name:

427 HESPERIDES RD. 421 EAST HILLCREST AVENUE Address: Address: City-St-Zip: LAKE WALES, FL 33853 City-St-Zip: LAKE WALES, FL 33853 US

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: GREGORY WIENS ES 02/17/2005