2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#739198

City-St-Zip: RALEIGH, NC 27612

Entity Name: ETERNAL LIFE MINISTRIES, INC.

FILED Jan 07, 2004 Secretary of State

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Current Principal Place of Business:			New Princ	cipal Place of Business:
	ERITH LANE NT, FL 34711	US		
Current Mailing Address:			New Maili	ing Address:
	ERITH LANE NT, FL 34711	US		
FEI Number	: 59-1759931	FEI Number Applied For()	FEI Number Not App	licable () Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:
10818 CHI	L, DOROTHY J ERITH LANE NT, FL 34711	US		
	named entity s e of Florida.	ubmits this statement for the p	ourpose of changing i	its registered office or registered agent, or both,
SIGNATU	RE:			
	Electroni	ic Signature of Registered Age	ent	Date
OFFICERS AND DIRECTORS:			ADDITION	NS/CHANGES TO OFFICERS AND DIRECTOR:
Title: Name: Address: City-St-Zip:	PD () WOODALL, OSO 10818 CHERITH CLERMONT, FL	LANE	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	D () WOODALL, JOH 47088 GLENAIR STERLING, VA	E CT	Title: Name: Address: City-St-Zip:	D (X) Change () Addition WOODALL, JOHN M., 2095 BEACON HILL WAY ALPHARETTA, GA 30005
Title: Name: Address: City-St-Zip:	D () WOODALL, DOI 10818 CHERITH CHERMONT, FL	LANE	Title: Name: Address: City-St-Zip:	D (X) Change () Addition WOODALL, DOROTHY J, 10818 CHERITH LANE CHERMONT, FL 34711
Title: Name: Address: City-St-Zip:	D () WERNER, LIND 10137 JACARAN CLERMONT, FL	NDA	Title: Name: Address: City-St-Zip:	D (X) Change () Addition WERNER, LINDA, 10137 JACARANDA CLERMONT, FL 34711
Title: Name:	D () WOODALL, LISA		Title: Name:	D (X) Change () Addition GRIFFIN, LISA WOODALL

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.

City-St-Zip: ROCKY MOUNT, NC 27804

SIGNATURE: OSCAR. M. WOODALL PRES 01/07/2004