2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#739198

FILED Jan 21, 2005 Secretary of State

Entity Name: ETERNAL LIFE MINISTRIES, INC. **Current Principal Place of Business: New Principal Place of Business:** 10818 CHERITH LANE CLERMONT, FL 34711 US **Current Mailing Address: New Mailing Address:** 10818 CHERITH LANE CLERMONT, FL 34711 US FEI Number: 59-1759931 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: WOODALL, DOROTHY J 10818 CHÉRITH LANE CLERMONT, FL 34711 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: (X) Delete () Change () Addition WOODALL, OSCAR M., Name: Name: 10818 CHERITH LANE Address: Address: City-St-Zip: CLERMONT, FL City-St-Zip: Title: Title: () Delete () Change () Addition Name: WOODALL, JOHN M., Name: Address: 2095 BEACON HILL WAY Address: City-St-Zip: ALPHARETTA, GA 30005 City-St-Zip: Title: () Delete Title: (X) Change () Addition WOODALL, DOROTHY J, Name: WOODALL, DOROTHY J, Name: 10818 CHERITH LANE Address: Address: 10818 CHERITH LANE City-St-Zip: CHERMONT, FL 34711 City-St-Zip: CHERMONT, FL 34711 Title: () Delete Title: () Change () Addition Name: WERNER, LINDA, Name: Address: 10137 JACARANDA Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: Title: () Delete Title: (X) Change () Addition GRIFFIN, LISA WOODALL GRIFFIN, LISA WOODALL Name: Name: 3258 TOWN HALL ROAD 6138 ANDREW THOMAS APT #234 Address: Address: City-St-Zip: ROCKY MOUNT, NC 27804 City-St-Zip: CHARLOTTE, NC 28269

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: DOROTHY J WOODALL PD 01/21/2005