

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751629

FILED
Jan 06, 2005
Secretary of State

Entity Name: BREAD MINISTRIES, INC.

Current Principal Place of Business:

1806 SE CROSS AVE.
ARCADIA, FL 34266 US

New Principal Place of Business:

Current Mailing Address:

U.S. 70 E. AT CROSS ST. S.
P O BOX 1017
ARCADIA, FL 34265 US

New Mailing Address:

FEI Number: 59-2008000 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EVERHART, KENNETH T
3224 NW ROUNDHOUSE
ARCADIA, FL 34266 US

Name and Address of New Registered Agent:

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:

Title: DS () Delete
Name: LIVINGSTON, MAZIE A
Address: 212 N ROBERTS AVE
City-St-Zip: ARCADIA, FL 34266

Title: T (X) Delete
Name: CAMP, ANDRE
Address: 3824 STATE ROAD 60 E
City-St-Zip: BARTOW, FL 33830

Title: D () Delete
Name: GASKINS, DOROTHY
Address: 6518 SE COUNTY RD 760
City-St-Zip: ARCADIA, FL 34266

Title: VPD () Delete
Name: EVERHART, KENNETH T
Address: 3224 NW ROUNDHOUSE
City-St-Zip: ARCADIA, FL 34266

Title: D () Delete
Name: GIBBS, JAMES CLAY
Address: 1806 SE CROSS AVE
City-St-Zip: ARCADIA, FL 34266

Title: P () Delete
Name: GIBBS, JUDITH M
Address: 1806 SE CROSS AVE
City-St-Zip: ARCADIA, FL 34266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DST (X) Change () Addition
Name: LIVINGSTON, MAZIE A
Address: 212 N ROBERTS AVE
City-St-Zip: ARCADIA, FL 34266

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JUDITH M GIBBS

P

01/06/2005

Electronic Signature of Signing Officer or Director

Date