


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 10, 2006 08:00 A
Secretary of State

DOCUMENT # 758196 1. Entity Name CIRCLE OF LOVE MINISTRIES, INC.	
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Principal Place of Business 13519 N MAIN ST JAX, FL 32218 US	Mailing Address P. O. BOX 28425 JACKSONVILLE, FL 32226-8425 US
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DO NOT WRITE IN THIS SPACE



01192006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-2187191	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent EDWIN H RUDER 13519-4 NORTH MAIN ST JACKSONVILLE, FL 32218

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8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE: <i>Betty F. Ruder</i> BETTY F. RUDER	DATE: <i>5-01-06</i>

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RUDER, EDWIN H 13519-4 N MAIN ST JACKSONVILLE, FL 32218
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST GUNTER, SARA 5201 ATLANTIC BLVD. #301 JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RUDER, BETTY F 13519-4 N MAIN ST JACKSONVILLE, FL 32218
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR JOHNS, GEORGE 2214 HILLTOP BLVD JACKSONVILLE, FL 32246
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR ANNUNZIATO, DAVID 13519 JACKSONVILLE, FL 32218
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR CRENSHAW, TERRY 7321 CEDAR POINT RD JACKSONVILLE, FL 32218

U00000565592
05/22/06-80003-006 70.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <i>Betty F. Ruder</i> BETTY F. RUDER	Date: <i>5-01-06</i>	Daytime Phone #: <i>904 751 1034</i>
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