2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#760441

FILED Apr 28, 2005 Secretary of State

Entity Name: FAITH TEMPLE MINISTRIES, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	EENFERN LANE NVILLE, FL 32277	US		
Current N	Mailing Address:		New Mailing Addre	ss:
	EENFERN LANE NVILLE, FL 32277	US		
FEI Numbei	r: 59-0722784 FI	El Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of Curr	ent Registered Agent:	Name and Address	of New Registered Agent:
6551 GRÉ	MARTIN D EENFERN LANE VVILLE, FL 32277	US		
The above	e named entity subr	nite this statement for the	purpose of changing its register	ad affice or registered agent, or both
	te of Florida.	into tino statement for the	purpose of onlinging its register	ed office of registered agent, or both,
in the Stat	te of Florida.	mis this statement for the	purpose of changing to register	ed office of registered agent, of both,
in the Stat	te of Florida.	ignature of Registered Ag		Date
in the Stat SIGNATU	te of Florida.	ignature of Registered Ag	ent	Date
in the Stat SIGNATU OFFICER Title: Name: Address:	te of Florida. IRE: Electronic S	ignature of Registered Ag RS: ete D E., 580 -# 115	ent	Date
in the Stat SIGNATU	te of Florida. IRE: Electronic S S AND DIRECTOR D () Dele OKERSTROM, DAVI 3432 STATE ROAD	ignature of Registered Ag RS: ete D E., 580-#115 FL 34695 ete LANE	ent ADDITIONS/CHANG Title: Name: Address:	Date BES TO OFFICERS AND DIRECTOR
in the Stat SIGNATU OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	te of Florida. IRE: Electronic S S AND DIRECTOR D () Dele OKERSTROM, DAVI 3432 STATE ROAD SAFETY HARBOR, F DP () Dele MARTIN, DWIGHT, 6551 GREENFERN	ignature of Registered Ag RS: ete D E., 580-#115 FL 34695 ete LANE 32277 ete	Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	Date BES TO OFFICERS AND DIRECTOR () Change () Addition

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: DWIGHT D. MARTIN DP 04/28/2005