2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765137

Entity Name: GLENN COTTON MINISTRIES, INC.

FILED May 03, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

102 SYNDEY CT 125 MUIRFIELD LANE DOTHAN, AL 36305 US DOTHAN, AL 36305 US

Current Mailing Address: New Mailing Address:

P.O. BOX 5961

DOTHAN, AL 36302 US

FEI Number: 59-2262013 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:

LETNER, ANDREA
4839 DEERMOSS WAY N
LETNER, ANDREA
3056 SETH DR.

JACKSONVILLE, FL 32217 US GREEN COVE SPRINGS, FL 32043 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: 05/03/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

 Name:
 COTTON, GLENN E
 Name:
 COTTON, GLENN E

 Address:
 VIDIMSKA 7 CIMICE
 Address:
 125 MUIRFIELD LANE

 City-St-Zip:
 PRAHA 8 CZECH REPUBLIC, CZ 181 00
 City-St-Zip:
 DOTHAN, AL 36305 US

Title: STD () Delete Title: STD (X) Change () Addition

 Name:
 COTTON, NANCY L
 Name:
 COTTON, NANCY L

 Address:
 VIDIMSKA 7 CIMICE
 Address:
 125 MUIRFIELD LANE

 City-St-Zip:
 PRAHA 8 CZECH REPUBLIC, CZ 181 00
 City-St-Zip:
 DOTHAN, AL 36305

Title: VD () Delete Title: () Change () Addition

 Name:
 COTTON, ASHER G
 Name:

 Address:
 102 SYDNEY CT
 Address:

 City-St-Zip:
 DOTHAN, AL 36305 US
 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: GLENN E COTTON PD 05/03/2004