## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#770432** 

Entity Name: NEVERTHELESS... MINISTRIES INC.

FILED May 06, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

1700 S. SAN PABLO RD.

7552 POTTSBURG LANDING DRIVE
APT. 417

7562 POTTSBURG LANDING DRIVE
JACKSONVILLE, FL 32216 US

JACKSONVILLE, FL 32224 US

Current Mailing Address: New Mailing Address:

1700 S. SAN PABLO RD.

APT. 417

JACKSONVILLE, FL 32224

US

7552 POTTSBURG LANDING DRIVE
JACKSONVILLE, FL 32216

US

FEI Number: 59-2337080 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:

HOLMAN, DEBORAH E
1700 S. SAN PABLO RD.
APT. 417
JACKSONVILLE, FL 32224 US
HOLMAN, DEBORAH E
7552 POTTSBURG LANDING DRIVE
JACKSONVILLE, FL 32216 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: 05/06/2004

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 CHASTANG, VICKI
 Name:

 Address:
 11760 MARCO BEACH DR. STE. 10
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32224
 City-St-Zip:

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

 Name:
 HOLMAN, DEBORAH E
 Name:
 HOLMAN, DEBORAH E

 Address:
 1700 S. SAN PABLO RD #417
 Address:
 7552 POTTSBURG LANDING DRIVE

 City-St-Zip:
 JACKSONVILLE, FL 32224 US
 City-St-Zip:
 JACKSONVILLE, FL 32216 US

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

 Name:
 MORRIS, ROCKWELL
 Name:

 Address:
 1755 LOQUAT LANE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32246
 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: DEBORAH E. HOLMAN PD 05/06/2004