2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 01, 2006
Secretary of State

DOCUMENT# 771086

Entity Name: "PREPARE HIS WAYS", MINISTRIES, INC.

Current Principal Place of Business:

27035 FOAMFLOWER BLVD.
ZEPHYRHILLS, FL 33544

New Principal Place of Business:

Current Mailing Address:

27035 FOAMFLOWER BLVD.
ZEPHYRHILLS, FL 33544

New Mailing Address:

FEI Number: 59-2468643 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BROCATO, FRANK M
27035 FOAM FLOWER BLVD
ZEPHYRHILLS, FL 33544 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: PTD ( ) Delete
Name: BROCATO, FRANK M,
Address: 27035 FOAM FLOWER BLVD
City-St-Zip: ZEPHYRHILLS, FL

Title: SD ( ) Delete
Name: GREENE, ROBERT V
Address: 617 MESSICK CT.
City-St-Zip: MURFREESBORO, TN

Title: VD ( ) Delete
Name: BROCATO, LINDA N
Address: 27035 FORAM FLOWER BLVD.
City-St-Zip: ZEPHYRHILLS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ( ) Change ( ) Addition
Name:
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 Chapter 119, 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: DR. FRANK M. BROCATO PTD 06/01/2006

Electronic Signature of Signing Officer or Director — Date