2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2005
Secretary of State

DOCUMENT# F00000002479

Entity Name: BILL KELLER MINISTRIES, INC.

Current Principal Place of Business:

6660 46TH AVENUE NORTH
ST PETERSBURG, FL 33709

New Principal Place of Business:

Current Mailing Address:

6660 46TH AVENUE NORTH
ST PETERSBURG, FL 33709

New Mailing Address:

FEI Number: 36-3897842 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KELLER, BILL
6660 46TH AVENUE NORTH
ST PETERSBURG, FL 33709 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: PCSD ( ) Delete
Name: KELLER, WILLIAM
Address: 601 ROSERY RD., #403
City-St-Zip: LARGO, FL

Title: VD ( ) Delete
Name: WATTS, WILLIAM
Address: 205 W. RANDOLPH #1300
City-St-Zip: CHICAGO, IL

Title: D ( ) Delete
Name: HARRIS, LEONARD
Address: 8110 S CLAREMONT
City-St-Zip: CHICAGO, IL

Title: D ( ) Delete
Name: WALTERS, CLYDE J
Address: 6020 82ND AVENUE NORTH
City-St-Zip: PINELLAS PARK, 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:

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 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: WILLIAM KELLER PCSD 02/13/2005

Electronic Signature of Signing Officer or Director — Date