2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006147

Apr 11, 2006 Secretary of State

Entity Name: CROWN FINANCIAL MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business: 601 BROAD STREET SE GAINESVILLE, GA 30501 **Current Mailing Address: New Mailing Address:** 601 BROAD STREET SE GAINESVILLE, GA 30501 FEI Number: 58-1260812 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BECK, C. THOMAS 1753 DEMETREE DR. WINTER PARK, FL 32789 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition BROWN JR, HARRY I LEONARD, WILLIAM I Name: Name: 2627 OVERHILL CIRCLE Address: 4800 MERLENDALE COURT Address: City-St-Zip: SYLACAUGA, AL 35150 US City-St-Zip: ATLANTA, GA 30327 US Title: () Delete Title: () Change () Addition Name: BLUE, RON Name: Address: 190 SHERIDAN POINT LANE Address: City-St-Zip: ATLANTA, GA 30342 US City-St-Zip: Title: () Delete Title: () Change () Addition PARKER, TERRY MR. Name: Name: 1330 OLD WOODBINE ROAD Address: Address: City-St-Zip: ATLANTA, GA 30319 US City-St-Zip: Title: CEO () Delete Title: () Change () Addition Name: DAYTON, HOWARD Name: Address: 601 BROAD STREET, S.E. Address: City-St-Zip: GAINESVILLE, GA 30501 US City-St-Zip: Title: () Delete Title: () Change () Addition DARDEN, TOM Name: Name: 2351 HALES ROAD Address: Address: City-St-Zip: RALEIGH, NC 27608 US City-St-Zip: Title: () Delete Title: () Change () Addition FOOSHEE, GEORGE Name: Name: Address: 650 N. STRATFORD Address: WHICHITA, KS 67206 US City-St-Zip: 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: KELLY G. SHEPARD CFO 04/11/2006