2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004687

Entity Name: CHURCH WORLD SERVICE, INC.

FILED Aug 20, 2004 Secretary of State

Current Principal Place of Business: 28606 PHILLIPS ST.				New Principal Place of Business:			
ELKHART,							
Current Mailing Address:				New Mailing Address:			
P.O. BOX 9 ELKHART,							
FEI Number:	13-4080201	FEI Number Applied For()	FEI Num	nber Not Appli	cable ()	Certificate of Status Desire	ed ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
PARALEGAL & ATTORNEY SERVICE BUREAU, INC. 1406 HAYS ST. #2 TALLAHASSEE, FL 32301 US				PARALEGAL & ATTORNEY SERVICE BUREAU, INC. 2750 OLD ST. AUGUSTINE RD., N145 TALLAHASSEE, FL 32301 US			
The above in the State	named entity s of Florida.	ubmits this statement for the pur	rpose of	f changing its	s registered	d office or registered agent,	or both,
SIGNATURE:				08/20/2004			
Electronic Signature of Registered Agent				Date			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	C () MCCULLOUGH, 475 RIVERSIDE NEW YORK, NY	DR., STE. 700		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	VC () RENDALL, JOAI P.O. BOX 968 ELKHART, IN 4			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	, ,			Title: Name: Address: City-St-Zip:	P VOSKUIL, B 4500 60TH S GRAND RAF		
Title: Name: Address: City-St-Zip:	V () VOSKUIL, BETT 4500 60TH ST., GRAND RAPIDS	SE		Title: Name: Address: City-St-Zip:	V RIGGS, JEN P.O. BOX 19 INDIANAPOI		
Title: Name: Address: City-St-Zip: Title: Name:	BASS, DEBORA 475 RIVERSIDE NEW YORK, NY	DR., RM 1518		Title: Name: Address: City-St-Zip: Title: Name:		NNAH HIGHWAY, SUITE A ON, SC 29407 (X) Change () Addition	
Address: City-St-Zip:	100 WITHERSP LOUISVILLE, K			Address: City-St-Zip:		4TH ST., APT. 1203	

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: JOANNE RENDALL VC 08/20/2004