## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000006398

Entity Name: FREEDOM WING MINISTRIES, INC.

FILED Apr 19, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

320 TUSCANY WAY #107 4641 DECATUR CIR.

MELBOURNE, FL 32940 MELBOURNE, FL 32934 US

Current Mailing Address: New Mailing Address:

320 TUSCANY WAY #107 4641 DECATUR CIR.

MELBOURNE, FL 32940 MELBOURNE, FL 32934 US

FEI Number: 73-1229421 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:

HOPPER, JACQULYN A
320 TUSCANY WAY #107
4641 DECATUR CIR.
MEL POURNE, EL 23044

MELBOURNE, FL 32940 MELBOURNE, FL 32934 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: 04/19/2004

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP ( ) Delete Title: CP (X) Change ( ) Addition Name: HOPPER, JACQULYN A Name: HOPPER, JACQULYN A

Address: 320 TUSCANY WAY #107 Address: 4641 DECATUR CIR.
City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: MELBOURNE, FL 32934 US

Title: VCVP ( ) Delete Title: VCVP (X) Change ( ) Addition Name: HOPPER, GARY C Name: HOPPER, GARY C

Name: HOPPER, GARY C
Address: 320 TUSCANY WAY #107
Address: MELBOURNE, FL 32940
Address: MELBOURNE, FL 32940
Address: MELBOURNE, FL 32934 US

Title: DST () Delete Title: () Change () Addition

 Name:
 CHOATE, KIMBERLY J
 Name:

 Address:
 8800 S. DREXEL #2411
 Address:

 City-St-Zip:
 OKLAHOMA CITY, OK 73159
 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: JACQULYN A. HOPPER CP 04/19/2004