

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004428

FILED
Jan 06, 2005
Secretary of State

Entity Name: INTERNATIONAL MINISTERIAL ASSOCIATION, INC.

Current Principal Place of Business:

5201 W. HOMOSASSA TRAIL
LECANTO, FL 34461

New Principal Place of Business:

Current Mailing Address:

5201 W. HOMOSASS TRAIL
LECANTO, FL 34461

New Mailing Address:

FEI Number: 74-6051852

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TODD, PAUL W
8161 W. BARRY CT.
HOMOSASSA, FL 34446 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: C () Delete
Name: DUDLEY, GEORGE A
Address: 11800 VINY RIDGE ROAD
City-St-Zip: ALEXANDER, AR 72002

Title: VC () Delete
Name: BENSON, KENNETH R
Address: 9000 EMERSON AVE. S.
City-St-Zip: BLOOMINGTON, MN

Title: D () Delete
Name: BRASEL, FRANK
Address: P.O. BOX 1423
City-St-Zip: VICTORVILLE, CA 923931423

Title: D () Delete
Name: AMUNDSON, VIRGIL W
Address: 293 HIGHWAY 63 S.
City-St-Zip: SHELL LAKE, WI 54871

Title: D () Delete
Name: MAYS, WAYNE
Address: 340 OLD HIGHWAY 78 W.
City-St-Zip: HAMILTON, AL 35570

Title: D () Delete
Name: SHANKLE, RANDY
Address: P.O. BOX 906
City-St-Zip: MONROE, NC 281110906

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: BENSON, KENNETH R REV.
Address: 14617 MEADOWWOOD DR
City-St-Zip: SAVAGE, MN 55378

Title: D (X) Change () Addition
Name: SMITH, DON R REV.
Address: 2567 E. APPALOOSA DR
City-St-Zip: VINCENNES, IN 47591

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

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

Title: D (X) Change () Addition
Name: COOK, DAVID W REV.
Address: 2369 BENRUS BLVD.
City-St-Zip: SAN ANTONIO, TX 78228

Title: D (X) Change () Addition
Name: WARNER, TIMOTHY L DR.
Address: 10293 S. MICHIGAN AVE
City-St-Zip: HAYWARD, WI 54843

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: PAUL W. TODD

DR.

01/06/2005

Electronic Signature of Signing Officer or Director

Date