FILED
Sep 14, 2006 8:00 am
Secretary of State

08-21-2006 90003 027 ****61.25

66024043

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F05000001819

1. Entity Name
GOSHEN MINISTRIES INC.

Principal Place of Business	Mailing Address
11485 OAKHURST RD. #200-201 LARGO, FL 33774	11485 OAKHURST RD. #200-201 LARGO, FL 33774

06092006 Chg-NP CR2E037 (4/06)

2. Principal Place of Business	3. Mailing Address
4629 SHORE DRIVE	
Suite, Apt. #, etc. #432	Suite, Apt. #, etc.
City & State VIRGINIA BEACH, VA	City & State
Zip 23455	Zip
Country VB CITY	Country

4. FEI Number
22-3098590
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
REEDER, PAMELA A 7050 BAYOU WEST PLACE PINELLAS PARK, FL 33782	Name REEDER, PAMELA A. Street 9078 134th WAY N City SEMINOLE, FL 33776

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: MARYAN M. McGRADY Maryan M. McGrady 8/15/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating) DATE

Filing Fee is $61.25
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MCGRADY, MARYAN M 11485 OAKHURST RD. #200-201 LARGO, FL 33774	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P McGRADY, MARYAN M. 4629 SHORE DR. #432 VIRGINIA BEACH VA 23455	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TS MCGRADY, ALAN G JONES FERRY RD, APT A-2 CARRBORO, NC 27510	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP McGRADY, ALAN G. 601 JONES FERRY RD. APT A-2 CARRBORO, NC 27510	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C MCGRADY, DREW T 22852 ANGOLA RD. EAST LEWES, DE 19958	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCGRADY, PHILIP M 273 BRIDGEVIEW CIRCLE CHESAPEAKE, VA 23320	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D McGRADY, PHILIP M. 1316 S. BARKSDALE RD MT. PLEASANT, SC 29464	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SIT REEDER, PAMELA A 9078 134th Way N SEMINOLE, FL 33776	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARYAN M. McGRADY Maryan M. McGrady 8/15/06 727-517-0789
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #