

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90170 044 ****61.25

DOCUMENT # F96000002956
 1. Entity Name
DAWN MINISTRIES INCORPORATED



J4UBJ007

Principal Place of Business
 5775 N UNION BLVD
 COLORADO SPRINGS, CO 80918 US

Mailing Address
 5775 N UNION BLVD
 COLORADO SPRINGS, CO 80918 US



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

04202004 Chg-NP CR2E037 (10/03)

City & State
 Zip Country

4. FEI Number
 77-0051490

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 SALCEDO, BERNARDO REV.
 10850 S.W. 133 PL
 #214
 MIAMI, FL 33176.

7. Name and Address of New Registered Agent
 Name: SALCEDO, BERNARDO REV.
 Street Address (P.O. Box Number is Not Acceptable): 9234 Ridge Pine Trail
 City: Orlando FL Zip Code: 32819

B. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2004

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	D HUNTER, JOHN 2760 FOUNTAIN OAKS DR. MORGAN HILL, CA 95037 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D W. Jack Hagar 7430 Winding Oaks Drive Colorado Springs, CO 80919 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SAWKINS, DAVE REV 590 SHAWNEE LANE SAN JOSE, CA 95123 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Stan R. Ciraulo 2200 Louis Holstrom Drive Morgan Hill, CA 95073 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MCSWEENEY, MIKE 14985 BOWDEN AVE. MORGAN HILL, CA 95037 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD STEELE, STEPHEN D. 9010 TUSCANY COLORADO SPRINGS, CO 80920 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD MONTGOMERY, JAMES DR. 5630 OLD FARM TERRACE COLORADO SPRINGS, CO 80917 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHNSON, JIM COMPAK 500 W. MADISON # 2210 CHICAGO, IL 60661 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: James H. Montgomery JAMES H. MONTGOMERY 4/21/04 719-548-7460
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #