

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 03, 2005
Secretary of State**

DOCUMENT# F97000003076

Entity Name: NASHVILLE INNER CITY MINISTRY, INC.

Current Principal Place of Business:

185 ANTHES DR.
NASHVILLE, TN 37210

New Principal Place of Business:

Current Mailing Address:

185 ANTHES DR.
NASHVILLE, TN 37210

New Mailing Address:

FEI Number: 58-1519894 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NATIONSCORP REGISTERED AGENTS, INC.
526 E. PARK AVE.
TALLAHASSEE, FL 32301 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: STEVENS, TURNEY
Address: 2416 MCINTYRE COURT
City-St-Zip: FRANKLIN, TN 37069

Title: PD () Delete
Name: YATES, OLIVER
Address: 5214 MEADOW LAKE RD.
City-St-Zip: BRENTWOOD, TN 37027

Title: S () Delete
Name: EVERSON, SHAWN
Address: 615 GRANNY WHITE PK.
City-St-Zip: BRENTWOOD, TN 37027

Title: T () Delete
Name: SUTTON, JIM
Address: 1166 ECHO LN
City-St-Zip: FRANKLIN, TN 37069

Title: BM () Delete
Name: MOORE, LEWIS
Address: 812 SNEED RD.
City-St-Zip: FRANKLIN, TN 37069

Title: BM () Delete
Name: CURRY, JEFF
Address: 4019 BREAKWATER DR.
City-St-Zip: HIXON, TN 37343

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: () Change () Addition
Name:
Address:
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: CHARLES K. NEWSOM

BUSM

03/03/2005

Electronic Signature of Signing Officer or Director

Date