2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2006
Secretary of State

DOCUMENT# F97000005205

Entity Name: FULL HOUSE MINISTRIES, INC.

Current Principal Place of Business:

PO BOX 4486
CLEARWATER, FL 337584486

New Principal Place of Business:

Current Mailing Address:

PO BOX 4486
CLEARWATER, FL 337584486

New Mailing Address:

FEI Number: 74-2356336 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WITHERALL, ELIZABETH A
5162 JENSON AVE.
SPRINGHILL, FL 34608 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: PDC ( ) Delete
Name: BERNARD, DANIEL G
Address: 2069 PLATEAU RD.
City-St-Zip: CLEARWATER, FL 33755 US

Title: VDC ( ) Delete
Name: BERNARD, KATHRYN E
Address: 2069 PLATEAU RD.
City-St-Zip: CLEARWATER, FL 337584486 US

Title: STD ( ) Delete
Name: KUBICKI, BRENDA
Address: 1808 HWY. 21 WEST
City-St-Zip: CALDWELL, TX 77836 US

Title: D ( ) Delete
Name: WOZNIAK, VINCE
Address: 2005 GREENBIER BLVD. H5
City-St-Zip: CLEARWATER, FL 33763 US

Title: D ( ) Delete
Name: KUBICKI, DON
Address: 1808 HWY 21 WEST
City-St-Zip: CALDWELL, TX 77836 US

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
Name:
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 Chapter 119, 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: KATHRYN ELAINE BERNARD VDC 03/15/2006

Electronic Signature of Signing Officer or Director — Date