2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000890

FILED Mar 16, 2004 Secretary of State

Entity Name: RENEWED LIFE MINISTRIES SOUTH FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 2575 LONE PINE ROAD PALM BEACH GARDENS, FL 33410 **Current Mailing Address: New Mailing Address:** P.O. BOX 31149 PALM BEACH GARDENS, FL 334201149 US FEI Number: 52-2216131 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SIMMS, JP III SIMMS, JP III 2575 LÓNE PINE ROAD 2575 LÓNE PINE ROAD PALM BEACH GARDENS, FL 33420 PALM BEACH GARDENS, FL 33410 US US 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: 03/16/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition MULLINS, TOM RAY, HAROLD Name: Name: 5343 NORTHLAKE BLVD. Address: 2101 N. AUSTRALIAN AVENUE Address: City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip: WEST PALM BEACH, FL 33407 Title: Title: () Delete () Change () Addition SIMMS, JP III Name: Name: Address: 2575 LONE PINE ROAD Address: City-St-Zip: PALM BEACH GARDENS, FL 33420 City-St-Zip: Title: PD() Delete Title: PD (X) Change () Addition THOMAS, KEITH Name: PETERS, TOM Name: 1101 S. FLAGLER DR 7255 SOUTH MILITARY TRAIL Address: Address: City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: LAKE WORTH, FL 33463 Title: VD () Delete Title: () Change () Addition Name: SHIPMAN, FRED Name: 365 JOG ROAD Address: Address: City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: Title: () Delete Title: () Change () Addition GORDON, HARRY Name: Name: 1903 AVE I Address: Address: City-St-Zip: FT. PIERCE, FL 34950 City-St-Zip: Title: () Delete Title: () Change () Addition WAY, JIM Name: Name: Address: **6285 45TH STREET** Address: VERO BEACH, FL 32967 City-St-Zip: 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: J P SIMMS III STD 03/16/2004