

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001647

FILED
Apr 23, 2004
Secretary of State**Entity Name:** LAYMAN'S WALK MINISTRIES, INC.**Current Principal Place of Business:**243 SANT ROSA BLVD
CANTONMENT, FL 32533**New Principal Place of Business:**3661 ANDREW JACKSON DRIVE
PACE, FL 32571**Current Mailing Address:**12570 SW 72 TERRACE
MIAMI, FL 33183**New Mailing Address:**3661 ANDREW JACKSON DRIVE
PACE, FL 32571**FEI Number:** 65-0993041**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DEARMAS, REINALDO
12570 SW 72 TERRACE
MIAMI, FL 33183 US**Name and Address of New Registered Agent:**COLUCCI, MICHAEL J PRES
3661 ANDREW JACKSON DRIVE
PACE, FL 32571 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: MICHAEL J. COLUCCI

04/23/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COLUCCI, MICHAEL J
Address: 243 SANTA ROSA BLVD
City-St-Zip: CANTONMENT, FL 32533

Title: VD () Delete
Name: COLUCCI, ADRIA
Address: 243 SANTA ROSA BLVD
City-St-Zip: CANTONMENT, FL 32533

Title: TD () Delete
Name: DEARMAS, REINALDO
Address: 12570 SW 72 TERRACE
City-St-Zip: MIAMI, FL 33183

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: COLUCCI, MICHAEL J
Address: 3661 ANDREW JACKSON DRIVE
City-St-Zip: PACE, FL 32571

Title: VP (X) Change () Addition
Name: COLUCCI, ADRIA
Address: 3661 ANDREW JACKSON DRIVE
City-St-Zip: PACE, FL 32571

Title: TD (X) Change () Addition
Name: COLUCCI, MICHAEL J
Address: 3661 ANDREW JACKSON DRIVE
City-St-Zip: PACE, FL 32571

Title: SEC () Change (X) Addition
Name: COLUCCI, ADRIA M
Address: 3661 ANDREW JACKSON DRIVE
City-St-Zip: PACE, FL 32571

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: MICHAEL J COLUCCI

PRES

04/23/2004

Electronic Signature of Signing Officer or Director

Date