## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000001974

Entity Name: TELL THE STORY MINISTRIES, INC.

FILED Apr 26, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1480 SW 5TH TERRACE DEERFIELD BEACH, FL 33441 **Current Mailing Address: New Mailing Address:** 1480 SW 5TH TERRACE DEERFIELD BEACH, FL 33441 FEI Number: 65-1022861 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: FULLER, HENRY E 1480 SW 5TH TERRACE DEERFIELD BEACH, FL 33441 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition WILLIAM, AVIS WILLIAMS, AVIS Name: Name: 1265 TUCKAWAY DR. Address: 1265 TUCKAWAY DR. Address: City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: ROCKLEDGE, FL 32955 Title: Title: ( ) Delete () Change () Addition MCCLEOD, GARY Name: Name: Address: 2420 NW 6 ST Address: City-St-Zip: POMPANO BEACH, FL 33069 City-St-Zip: Title: () Delete Title: () Change () Addition LEE, HAYWARD JR Name: Name: Address: 2438 NW 8 ST Address: City-St-Zip: POMPANO BEACH, FL 33069 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: FEACHER, CATHERINE Name: Address: 3331 N.W. 15TH PLACE Address: City-St-Zip: FORT LAUDERDALE, FL 33311 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition CLARK, J C CLARK, J.C. Name: Name: 631 NE 43 ST 631 NE 43 ST Address: Address: FT LAUDERDALE, FL 33334 City-St-Zip: City-St-Zip: FT LAUDERDALE, FL 33334 Title: () Delete Title: () Change () Addition FULLER. MARILYN Name: Name: Address: 1480 SW 5TH TERRACE Address: DEERFIELD BEACH, FL 33441 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: MARILYN FULLER T 04/26/2004