

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 25, 2005 8:00 am**  
**Secretary of State**

04-25-2005 90303 035 \*\*\*\*70.00

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<b>DOCUMENT # N00000002085</b> 1. Entity Name <b>THE GREATNESS OF THE LORD MISSION OF JESUS CHRIST, INC.</b>					
Principal Place of Business <b>139 NW 5TH AVE. DELRAY BEACH, FL 33444</b>			Mailing Address <b>215 SW 2ND AVENUE DELRAY BEACH, FL 33444</b>		
2. Principal Place of Business <b>SAME AS ABOVE</b>			3. Mailing Address <b>SAME AS ABOVE</b>		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number <b>65-0995355</b>	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent <b>SPIEGEL &amp; UTRERA, P.A. 343 ALMERIA AVENUE CORAL GABLES, FL 33134</b>				7. Name and Address of New Registered Agent Name <b>REV. OSIAS DERILUS</b> Street Address (P.O. Box Number is Not Acceptable) <b>3555 HARLOWE AVENUE</b> City <b>BOYNTON BEACH</b> <b>FL</b> Zip Code <b>33436</b>	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Osiás Derilus</i></u> <span style="float: right;">05-20-05</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ALFRED, JOSEPH 221 ROSS DR. DELRAY BEACH, FL 33445	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD THOMAS, VLADIMIR 215 SW 2TH AVENUE DELRAY BEACH, FL 33444
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD NARCISSE, CALIXTE 3406 AVE VILLANDRY DELRAY BEACH, FL 33444	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMAS, VLADIMAR 215 SW 2ND AVE. DELRAY BEACH, FL 33444	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LIRENA, JOSEPH 21 SW 6TH AVE., APT. 5 DELRAY BEACH, FL 33444	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FIMERLUS, JESUMENE 341 SE 3RD AVE. DELRAY BEACH, FL 33444	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C GASPARD, AROLD 5553 BOYNTON PLACE BOYNTON BEACH, FL 33437	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Lirena Joseph</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <u>04-20-05</u> (56) 577-9365 <small>Daytime Phone #</small>	