


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # N00000002446 * 1. Entity Name END TIME INTERNATIONAL MINISTRY, INC.	
--	---

Principal Place of Business 106 HILTON STREET NW PALM BAY, FL 32907	Mailing Address 106 HILTON STREET NW PALM BAY, FL 32907
--	--



02062005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3641824	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent RAYNOR, GERALDINE G REV 106 HILTON STREET NW PALM BAY, FL 32907

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RAYNOR, GERALDINE G REV 106 HILTON STREET NW PALM BAY, FL 32907
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD RAYNOR, MILES A JR. 135 POINTER RIDGE TRL. FAYETTEVILLE, GA 30214
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BERNARD, BRYAN 884 CHATSWORTH DRIVE MELBOURNE, FL 32940
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD TIMES, BELINDA M 20081 13TH AVE MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BERTENA, RANDOLPH B 325 E UNIVERSITY BLVD APT 27 MELBOURNE, FL 32901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000358704
05/04/05-R0126-008 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Raynor, Geraldine G April 27, 05 321-951-8070
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #