2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2006
Secretary of State

DOCUMENT# N00000003658

Entity Name: DEWEY ROWE MINISTRIES INC.

Current Principal Place of Business:

2144 W MARTIN STREET
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

DEWEY ROWE MINISTRIES
PO BOX 420307
KISSIMMEE, FL 34742

New Mailing Address:

FEI Number: 52-2258355 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROWE, DEWEY
2144 W. MARTIN ST.
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

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:

Title: P ( ) Delete
Name: ROWE, DEWEY
Address: 1 TROPHY LANE
City-St-Zip: KISSIMMEE, FL 34759

Title: D ( ) Delete
Name: SOUTHERN, DIANNA L
Address: 2144 W. MARTIN ST.
City-St-Zip: KISSIMMEE, FL 34741

Title: D ( ) Delete
Name: FIELDS, JEANNIE
Address: 2144 W. MARTIN ST.
City-St-Zip: KISSIMMEE, FL 34741

Title: D ( ) Delete
Name: DIANE, CALLIHAN
Address: 2144 W. MARTIN ST.
City-St-Zip: KISSIMMEE, FL 34741

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ROWE, DEWEY
Address: 2144 W. MARTIN ST.
City-St-Zip: KISSIMMEE, FL 34741

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DEWEY ROWE P 01/04/2006

Electronic Signature of Signing Officer or Director — Date