2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2006 08:00 AM
Secretary of State

DOCUMENT # N00000004503

1. Entity Name
PRELUDE WORLDWIDE MINISTRIES INC.

Principal Place of Business	Mailing Address
1711 WORTHINGTON RD. SUITE 108 WEST PALM BEACH, FL 33409	1711 WORTHINGTON RD. SUITE 108 WEST PALM BEACH, FL 33409

01072006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1021656
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KOCH, MARILYN
2760 WHITEWING LANE
WEST PALM BEACH, FL 33409

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

Filing Fee is $61.25
Due by May 1, 2006

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	KOCH, MARK W
STREET ADDRESS	1711 WORTHINGTON RD. SUITE 108
CITY-ST-ZIP	WEST PALM BEACH, FL 33409
TITLE	D
NAME	ILITCH, MICHAEL
STREET ADDRESS	1711 WORTHINGTON RD.
CITY-ST-ZIP	WEST PALM BEACH, FL 33409
TITLE	D
NAME	KOCH, STEPHANIE
STREET ADDRESS	1711 WORTHINGTON RD.
CITY-ST-ZIP	WEST PALM BEACH, FL 33409
TITLE	D
NAME	WILES, JOHN
STREET ADDRESS	1711 WORTHINGTON RD.
CITY-ST-ZIP	WEST PALM BEACH, FL 33409
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/02/06-80072-008 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: J.W. Wiles III 1/21/06 561-6865762
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #