


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Sep 12, 2005 8:00 am
Secretary of State

09-12-2005 90001 025 ****61.25

DOCUMENT # N00000004833	
1. Entity Name TELIM INTERNATIONAL MINISTRIES, INC.	

Principal Place of Business 3491 TORRINGTON WAY TALLAHASSEE FL 32317	Mailing Address P O BOX 7152 TALLAHASSEE FL 32314
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2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

2nd MOORE CR2E037 (5/05)

6. Name and Address of Current Registered Agent SMITH, ZELLENE W REV. 437 MERCURY DRIVE 3491 TORRINGTON WAY TALLAHASSEE FL 32317	
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7. Name and Address of New Registered Agent Name SMITH, ZELLENE W. REV. Street Address (P.O. Box Number is Not Acceptable) 3491 TORRINGTON WAY City TALLAHASSEE FL Zip Code 32317	
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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 <u><i>Zellene W. Smith</i></u> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>	
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FILE NOW: FEE IS \$61.25 Due By September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. DP OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SMITH, ZELLENE W REV P O BOX 7152 TALLAHASSEE FL 32314 D <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SMITH, STERLING B P O BOX 7152 TALLAHASSEE FL 32314 D <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SMITH, DEWEY III P O BOX 7152 TALLAHASSEE FL 32314 D <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GIBSON, VERNICE Y REV P O BOX 7152 TALLAHASSEE FL 32314 D <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GAY, SAMUEL P O BOX 7152 TALLAHASSEE FL 32314 ST <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SMITH, PAMELIA J P O BOX 7152 TALLAHASSEE FL 32314 D <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SMITH, ZELLENE W REV P O BOX 7152 TALLAHASSEE, FL 32314 DIT <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Williams, Wallace McDonald 21610 SW 109 AVENUE MIAMI, FL 33170 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Williams, Phelamon T. 1029 Westbrook Circle JACKSONVILLE, FL 32209 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JONES, Emma L. 1029 Westbrook Circle JACKSONVILLE, FL 32209 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T Simmons, Taylor 439 MERCURY DRIVE TALLAHASSEE, FL 32305 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T Lightburn, Janie P O BOX 7152 TALLAHASSEE, FL 32314 <input type="checkbox"/> Change <input checked="" 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.	
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SIGNATURE: <u><i>Rev. Zellene W. Smith</i></u> ZELLENE W. SMITH 9-7-05 8781408
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>