

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91256 025 ****70.00

DOCUMENT # N00000005803

1. Entity Name
EFFECTIVE FATHER MINISTRIES, INC.



Principal Place of Business
**1750 UNIVERSITY DRIVE
SUITE 214
CORAL SPRINGS, FL 33071**

Mailing Address
**1401 E. BROWARD BLVD.
SUITE 300
FORT LAUDERDALE, FL 33301-~~3102~~
2116**

94083776



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04272004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
65-1038783

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HODGES, PERRY W JR
1401 E. BROWARD BLVD.
SUITE 300
FORT LAUDERDALE, FL 33301-~~3102~~
2116**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME REAM, JOHN K ☐ Delete
STREET ADDRESS 7720 VENTURA LANE
CITY-ST-ZIP PARKLAND, FL 33067

TITLE VD
NAME REAM, RITA M ☐ Delete
STREET ADDRESS 7720 VENTURA LANE
CITY-ST-ZIP PARKLAND, FL 33067

TITLE STD
NAME WESSERMAN, WILLIAM L ☐ Delete
STREET ADDRESS 2910 NW 113TH AVE
CITY-ST-ZIP SUNRISE, FL 33323

TITLE D
NAME APPELGATE, ROBERT ☐ Delete
STREET ADDRESS 7060 N.W. 20TH STREET
CITY-ST-ZIP FORT LAUDERDALE, FL 33313

TITLE D
NAME HANIFIN, WILLIAM ☐ Delete
STREET ADDRESS 5011 N.E. 23RD AVE
CITY-ST-ZIP LIGHTHOUSE POINT, FL 33064

TITLE D
NAME GODUTI, DAVID ☐ Delete
STREET ADDRESS 4991 KINGSTON WAY
CITY-ST-ZIP NAPLES, FL 34119

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/29/04 954-341-5088