2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Mar 15, 2004 08:00 AM Secretary of State **DOCUMENT # N00000006101** 1. Entity Name CPM CHURCH, INC. Principal Place of Business Mailing Address 5207 MASON DIXON AVE 5207 MASON DIXON AVE **BOWLING GREEN, FL 33834 BOWLING GREEN, FL 33834** 03102004 No Cha-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 04-3672825 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PARKER, MARK DO NOT WRITE 5207 MASON DIXON AVE BOWLING GREEN, FL 33834 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 agont and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **\$5.00** May Be Filing Fee is \$61.25 U00000088638 Trust Fund Contribution. Due by May 1, 2004 Added to Fees 03/15/04-80058-023 81.25 OFFICERS AND DIRECTORS 10. TITLE NAME HERRON, DOUG STREET ADDRESS 516 S 11TH AVE CITY-ST-ZIP WAUCHULA, FL 33873 MAME PARKER, JOHNNY STREET ADDRESS 3824 PARKER RD CITY-ST-ZP BOWLING GREEN, FL 33834 TITLE NAME TAYLOR, BARRY STREET ADDRESS 2545 MATTE RD DO NOT WRITE CRY-ST-ZIP AVON PARK, FL 33825 IN THIS SPACE TITLE NAME PALMER, EARNEST STREET ADDRESS 214 W PALMETTO AVE CITY-ST-ZP WAUCHULA, FL 33873 TITLE NAME PARKER, MARK STREET ADDRESS 5207 MASON DIXON AVE CITY-ST-7/P BOWLING GREEN, FL 33834

FILED

12. I hereby certify that the information supplied with this filling 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 a other like empowered.

SIGNATURE:

MARIX PARKER

3/10/04