2004 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N00000006515



FILED Apr 28, 2004 8:00 am Secretary of State

| 1. Entity Nam ONE IN T | HE SPIRIT MINISTRIES INC | | 04-28-200 | 04 90205 033 * | ***61.25 | | | |
|--|---|---|---------------------------------------|--|--|---|-----------------------------|--|
| 2889 NW 14 | e of Business CT RDALE, FL 33311 | Mailing Address 2889 NW 14 CT FORT LAUDERDALE, FL | 33311 |) | 1 4 1 311 1 4 1 111 4 1 111 1 4 1 111 1 4 1 111 | (1) a e lla allei area (1406) de | 11101 M1 (89) | |
| 2. Principal Place of Business | | 3. Mailing Address | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 04262004 | Chg-NP C | CR2E037 (10/03) | | |
| City & State | | City & State | | 4. FEI Number 65-10422 | 79 | | oplied For ot Applicable | |
| Zip | Country | Zip | Country | 5. Certificate of S | Status Desired | S8.75 Add Fee Require | | |
| | 6. Name and Address of Current R | egistered Agent | Name | 7. Name and Ad | dress of New Regi | stered Agent | | |
| HENDERSON, VICKIE | | | | ine . | | | | |
| 1820 N W | 33RD AVENUE JDERDALE, FL 33311 | | Street Address | | (P.O. Box Number is Not Acceptable) | | | |
| * | .* | | City | | | FL Zip Cod | e | |
| | named entity submits this statement for | the purpose of changing its re | gistered office o | r registered agent, or both, i | n the State of Florida | a. I am familiar with, | and accept | |
| the obligat | tions of registered agent. | | | | | | | |
| SIGNATURE | in the second | • | • | | | | | |
| SIGNATURE | Signature, typed or printed name of registered agent ar | nd title if applicable. (NOTE: F | Registered Agent signa | dure required when reinstating) | y' . | DATE | 1 | |
| | Filing Fee is \$61.25 Due by May 1, 2004 | 9. Election Camp Trust Fund Co | | \$5.00 May Be Added to Fees | | check payable to Department of St | | |
| 10. | OFFICERS AND DIRE | CTORS | 11. | ADDITIONS/CHANG | GES TO OFFICERS | AND DIRECTORS IN | 10 | |
| TITLE NAME STREET ADORESS CITY-ST-ZIP | PD HENDERSON, VICKIE 1820 MW 33RD AVE FOIRT LAUDERDALE, FL | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Change | ☐ Addition | |
| TITLE NAME STREET ADORESS CITY-ST-ZIP | DVP SIMMONS, JAMES 3551 SW 2ND ST FORT LAUDERDALE, FL 33312 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | FSD LITTLE, SHERRY 1820 NW 33RD AVE FORT LAUDERDALE, FL 33311 | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | AVP SHERRY LITT 1820 NW 33R FORT LAUDER | LE D Ave DALE, FL | ⊠ Change 33311 | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD ROYSTEN, ANDREA 1810 NW 35TH WAY FORT LAUDERDALE, FL 33311 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD ANDREA ROYS 1810 NW 35T FORT LAUDER | TER H Way DALE, FL | IX Change 33311 | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | CSD LEWIS-SAPP, DE ANNA 617 NW 15TH AVE #1 POMPANO BEACH, FL 33069 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | CSD SHAWANDA HA 11617 NW 27 CORAL SPRIN | TH COURT | ⊠ Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | none planter of the fig. | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | Change | 1 | |
| indicated of the cor | certify that the information supplied with to on this report or supplemental report is to poration or the receiver or trustee empoyer on an attach and with a reddress. | rue and accurate and that my vered to execute this report as | signature shall h | have the same legal effect as | if made under oath | : that I am an officer | oformation or director | |

VICKIE HENDERSON
PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 4/23/2004 954-485-6607 Daytime Phone #