


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2006 8:00 am
Secretary of State

03-29-2006 90116 049 ****61.25

DOCUMENT # N00000007368 1. Entity Name BREATH OF THE SPIRIT MINISTRIES, INC.					
Principal Place of Business 543 EMERALD COVE LOOP LAKELAND, FL 33813			Mailing Address 543 EMERALD COVE LOOP LAKELAND, FL 33813		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		01092006 Chg-NP CR2E037 (11/05)	
City & State		City & State		4. FEI Number NOT APPLICABLE	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BREATHITT, BARBARA L 543 EMERALD COVE LOOP LAKELAND, FL 33813				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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 <i>Barbara L Breathitt</i> DATE <i>3/24/06</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>	
Filing Fee is \$61.25 Due by May 1, 2006		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	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE D <input type="checkbox"/> Delete NAME BREATHITT, BARBARA L STREET ADDRESS 543 EMERALD COVE LOOP CITY-ST-ZIP LAKELAND, FL 33813				TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME <i>Managing Director</i> STREET ADDRESS <i>Steven Breathitt</i> CITY-ST-ZIP <i>7913 Creek View Dr NRI, TX 76180</i>	
TITLE D <input checked="" type="checkbox"/> Delete NAME CHEATHAM, PAUL STREET ADDRESS 1126 HILLTOP DRIVE CITY-ST-ZIP IRVING, TX 75060				TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition NAME <i>Treasurer</i> STREET ADDRESS <i>Roxanne Rowe</i> CITY-ST-ZIP <i>5704 Louise Way Drive Arlington, TX 76017</i>	
TITLE C <input type="checkbox"/> Delete NAME COKING, PATRICIA STREET ADDRESS 303 NORTH LINDSAY #R-30 CITY-ST-ZIP MESA, AZ 85213				TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME <i>Director</i> STREET ADDRESS <i>Richard Maisenbacher</i> CITY-ST-ZIP <i>3391 Kilmer Drive Lakeland, Florida 33803</i>	
TITLE D <input checked="" type="checkbox"/> Delete NAME JACKSON, JOHN PAUL STREET ADDRESS 46 NEWPORT ROAD SUITE 210 CITY-ST-ZIP NEW LONDON, NH 03251				TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition NAME <i>Secretary</i> STREET ADDRESS <i>JoAnne Rost</i> CITY-ST-ZIP <i>4001 Oak Point Drive Crossroads TX 76227</i>	
TITLE T <input type="checkbox"/> Delete NAME MAISENBACHER, RICHARD STREET ADDRESS 1412 WYNGATE LANE CITY-ST-ZIP LAKELAND, FL 33809				TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME <i>Secretary</i> STREET ADDRESS <i>JoAnne Rost</i> CITY-ST-ZIP <i>4001 Oak Point Drive Crossroads TX 76227</i>	
TITLE S <input checked="" type="checkbox"/> Delete NAME HARDTER, JEANENE STREET ADDRESS 8509 JEANES LANE CITY-ST-ZIP ALVARADO, TX 76009				TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition NAME <i>Secretary</i> STREET ADDRESS <i>JoAnne Rost</i> CITY-ST-ZIP <i>4001 Oak Point Drive Crossroads TX 76227</i>	
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 <i>Barbara L Breathitt</i> <i>Barbara L Breathitt</i> <i>8/7 706 3019</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Define Phone #</small>					

Attached Additional List ATTACHMENT

Alan Drake Title Director

3248 North Galloway #408

Mesquite, TX 75150

Addition 40041126.
#N00000007368