


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 21, 2004 8:00 am**  
**Secretary of State**

04-21-2004 90027 005 \*\*\*\*70.00

<b>DOCUMENT #</b> N00000007725	
<b>1. Entity Name</b> MARCIA DAVIS MINISTRIES, INC	

<b>Principal Place of Business</b> 5961 NW 15TH ST LAUDERHILL, FL 33313	<b>Mailing Address</b> PO BOX 8886 LAUDERHILL, FL 33313
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<b>2. Principal Place of Business</b> 3451 BERKELEY BLVD Suite, Apt. #, etc.	<b>3. Mailing Address</b> P.O. BOX 8886 Suite, Apt. #, etc.
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<b>City &amp; State</b> FT. LAUDERDALE FL.	<b>City &amp; State</b> FT. LAUDERDALE FL.
<b>Zip</b> 33312	<b>Zip</b> 33310
<b>Country</b> BROWARD	<b>Country</b> BROWARD

<b>6. Name and Address of Current Registered Agent</b> DAVIS, MARCIA 5961 NW 15TH ST SUNRISE, FL. 33313	<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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: Marcia Davis DATE: 04/16/04

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2004</b>	<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00 May Be</b> <b>Added to Fees</b>	<b>Make check payable to</b> <b>Florida Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
<b>TITLE</b> PD	<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b> DAVIS, MARCIA		<b>NAME</b>	
<b>STREET ADDRESS</b> 5961 NW 15TH ST		<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b> SUNRISE, FL 33313		<b>CITY-ST-ZIP</b>	
<b>TITLE</b> TD	<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b> DAVIS, RALSTON		<b>NAME</b>	
<b>STREET ADDRESS</b> 5961 NW 15TH ST		<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b> SUNRISE, FL 33313		<b>CITY-ST-ZIP</b>	
<b>TITLE</b> D	<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b> MORRISON, MARJORIE		<b>NAME</b>	
<b>STREET ADDRESS</b> 4200 NW 42ND AVE		<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b> LAUDERDALE LAKES, FL 33319		<b>CITY-ST-ZIP</b>	
<b>TITLE</b> D	<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b> MCNEIL, EVELYN		<b>NAME</b>	
<b>STREET ADDRESS</b> 9841 SUNRISE LAKES BLVD, BLDG 149		<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b> SUNRISE, FL 33322		<b>CITY-ST-ZIP</b>	
<b>TITLE</b> SD	<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b> BROWN-MANNINGS, VERA		<b>NAME</b>	
<b>STREET ADDRESS</b> 441 SW 22ND TERR		<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b> FT. LAUDERDALE, FL 33312		<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>		<b>NAME</b>	
<b>STREET ADDRESS</b>		<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>		<b>CITY-ST-ZIP</b>	

**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: Marcia Davis DATE: 04/16/04 DAYTIME PHONE: 954 4974776

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR