

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000211

FILED
Apr 05, 2005
Secretary of State

Entity Name: HOME FRONT MINISTRIES INC.

Current Principal Place of Business:

341 S. MARION STREET
SUITE 2
LAKE CITY, FL 32025

New Principal Place of Business:

Current Mailing Address:

4304 COUNTY ROAD 252
WELLBORN, FL 32094

New Mailing Address:

FEI Number: 81-0604502

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIEGEL, DEANNA
4304 COUNTY ROAD 252
WELLBORN, FL 32094 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RIEGEL, DEANNA
Address: 4304 COUNTY ROAD 252
City-St-Zip: WELLBORN, FL 32094

Title: VD () Delete
Name: COLEMAN, ALBERTA
Address: RT 11 BOX 3330
City-St-Zip: LAKE CITY, FL 32024

Title: STD () Delete
Name: LAROCHE, MARILYN
Address: RT 6 BOX 470B
City-St-Zip: LAKE CITY, FL 32025

Title: D () Delete
Name: COXE, TRULA
Address: RT 21 BOX 43
City-St-Zip: LAKE CITY, FL 32024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEANNA RIEGEL

PD

04/05/2005

Electronic Signature of Signing Officer or Director

Date