

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000869

FILED  
Jan 10, 2005  
Secretary of State

Entity Name: FREEDOM FELLOWSHIP MINISTRIES, INC.

**Current Principal Place of Business:**

1301 HWY 29N  
LABELLE, FL 33935

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 1797  
LABELLE, FL 339751797

**New Mailing Address:**

FEI Number: 65-0967622

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

EDGAR, MARSHA  
580 BRITTANY LANE  
LABELLE, FL 33935 US

**Name and Address of New Registered Agent:**

EDGAR, MARSHA D  
580 BRITTANY LANE  
LABELLE, FL 33935 US

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: MARSHA D. EDGAR

01/10/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: T ( ) Delete  
Name: EDGAR, DARYL D  
Address: 4013 ALBANY ROAD/PO BOX 2361  
City-St-Zip: LABELLE, FL 339752361

Title: T ( ) Delete  
Name: EDGAR, MARSHA D  
Address: 4013 ALBANY ROAD/PO BOX 2361  
City-St-Zip: LABELLE, FL 339752361

Title: T ( ) Delete  
Name: JORDAN, KIMBERLY A  
Address: 4790 EVERGLADE AVE.  
City-St-Zip: LABELLE, FL 33935

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: T (X) Change ( ) Addition  
Name: EDGAR, MARSHA D  
Address: 580 BRITTANY LANE/PO BOX 2361  
City-St-Zip: LABELLE, FL 339752361

Title: T (X) Change ( ) Addition  
Name: EDGAR, DARYL D  
Address: 580 BRITTANY LANE/PO BOX 2361  
City-St-Zip: LABELLE, FL 339752361

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: MARSHA D. EDGAR

T

01/10/2005

Electronic Signature of Signing Officer or Director

Date