

**2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Oct 11, 2005**  
**Secretary of State**

DOCUMENT# N01000001118

**Entity Name:** JOURNEY FELLOWSHIP CHURCH, INC.**Current Principal Place of Business:**12278 E. COLONIAL DR.  
SUITE 500  
ORLANDO, FL 32826**New Principal Place of Business:****Current Mailing Address:**12278 E. COLONIAL DR.  
SUITE 500  
ORLANDO, FL 32826**New Mailing Address:****FEI Number:** 58-2604873**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**JOURNEY FELLOWSHIP  
12278 E. COLONIAL DR.  
SUITE 500  
ORLANDO, FL 32826 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:** D ( ) Delete  
**Name:** BAXTER, DAVID  
**Address:** 4531 WATERSIDE POINTE CIRCLE  
**City-St-Zip:** ORLANDO, FL 32829**Title:** D ( ) Delete  
**Name:** BOLDEN, ROBBY  
**Address:** 218 CORALBERRY PT.  
**City-St-Zip:** ORLANDO, FL 32828**Title:** D (X) Delete  
**Name:** FLORES, MATTHEW  
**Address:** 877 PARK MANOR DR.  
**City-St-Zip:** ORLANDO, FL 32825**Title:** D (X) Delete  
**Name:** MCCORNICK, KEVIN  
**Address:** 538 ELGIN BLVD.  
**City-St-Zip:** DAVENPORT, FL 33897**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** D (X) Change ( ) Addition  
**Name:** FLORES, MATTHEW  
**Address:** 877 PARK MANOR DRIVE  
**City-St-Zip:** ORLANDO, FL 32825**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: DAVID BAXTER

D

10/11/2005

Electronic Signature of Signing Officer or Director

Date