2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2004
Secretary of State

DOCUMENT# N01000001946

Entity Name: COMISSION MINISTRIES, INC.

Current Principal Place of Business:

2716 N. 62ND ST.
TAMPA R, FL 33619

New Principal Place of Business:

2716 N. 62ND ST.
TAMPA R, FL 33619 US

Current Mailing Address:

2716 N. 62ND ST.
TAMPA R, FL 33619

New Mailing Address:

FEI Number: 59-3721017 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRACKETT, CECIL
2716 N 62ND STREET
TAMPA, FL 33619 US

Name and Address of New Registered Agent:

BRACKETT, CECIL E
2716 N 62ND STREET
TAMPA, FL 33619 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: CECIL BRACKETT 02/03/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BRACKETT, CECIL
Address: 2716 62ND STREET, N.
City-St-Zip: TAMPA, FL 33610

Title: VD ( ) Delete
Name: HOWELL, FLORENCE
Address: 3304 E COLUMBUS DR
City-St-Zip: TAMPA, FL 33605

Title: STD ( ) Delete
Name: BRACKETT, SHARON
Address: 2716 62ND ST. N
City-St-Zip: TAMPA, FL 33610

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: BRACKETT, CECIL E
Address: 2716 62ND STREET, N.
City-St-Zip: TAMPA, FL 33610

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

Title: STD (X) Change ( ) Addition
Name: BRACKETT, SHARON J
Address: 2716 62ND ST. N
City-St-Zip: TAMPA, FL 33610

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: CECIL BRACKETT PD 02/03/2004
Electronic Signature of Signing Officer or Director Date