

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002285

FILED  
Aug 12, 2004  
Secretary of State

**Entity Name:** DEFENDERS OF THE GOSPEL MINISTRIES, INC.

**Current Principal Place of Business:**

358 NW 65 TERRACE  
PLANTATION, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 15664  
FORT LAUDERDALE, FL 33318

**New Mailing Address:**

**FEI Number:** 65-1066808

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHELBY, DANA M  
358 NW 65 TERRACE  
PLANTATION, FL 33317

**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: P ( ) Delete  
Name: SHELBY, DANA  
Address: 358 NW 65 TERR  
City-St-Zip: PLANTATION, FL 33317

Title: S ( ) Delete  
Name: THOMAS, DOROTHY  
Address: 4421 NW 34 PL  
City-St-Zip: FORT LAUDERDALE, FL 33317

Title: T ( ) Delete  
Name: MARTIN, PAULINO  
Address: 7150 NW 44 CT  
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: D ( ) Delete  
Name: CAUDLE, ORVILLE  
Address: 4075 NW 19 STREET  
City-St-Zip: FORT LAUDERDALE, FL 33313

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

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

Title: S (X) Change ( ) Addition  
Name: THOMAS, DOROTHY  
Address: 4421 NW 34 PL  
City-St-Zip: PLANTATION, FL 33317

Title: T (X) Change ( ) Addition  
Name: MARTIN, PAULINE  
Address: 7150 NW 44 CT  
City-St-Zip: LAUDERHILL, FL 33319

Title: D (X) Change ( ) Addition  
Name: CAUDLE, ORVILLE  
Address: P.O. BOX 15664  
City-St-Zip: PLANTATION, FL 33318

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: PAULINE MARTIN

T

08/12/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date