

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002836

FILED
Aug 24, 2005
Secretary of State

Entity Name: JUDY PETERSON MINISTRIES, INC.

Current Principal Place of Business:

PO BOX 941413
MAITLAND, FL 327941413

New Principal Place of Business:

Current Mailing Address:

PO BOX 941413
MAITLAND, FL 327941413

New Mailing Address:

FEI Number: 59-3714234 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

PETERSON, JUDY A
843 GRAND REGENCY POINTE, #102
ALTAMONTE SPRINGS, FL 32714 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: O () Delete
Name: INGRAM, DRUSILLA
Address: 4303 AVE. Q
City-St-Zip: FT. PIERCE, FL 34947

Title: D () Delete
Name: PETERSON, JUDY A
Address: 843 GRAND REGENCY POINTE, #102
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: O () Delete
Name: PETERSON, NATHAN W
Address: 2604 IROQUOIS AVE.
City-St-Zip: FT. PIERCE, FL 34946

Title: O () Delete
Name: STREATER, MALVERNA N
Address: 2318 VINKARA DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

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: JUDY A. PETERSON

D

08/24/2005

Electronic Signature of Signing Officer or Director

Date