2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003697

2240 LION TR

PORT CHARLOTTE, FL 33952

Address:

City-St-Zip:

Entity Name: THE REMNANT SEED MINISTRIES, INC.

FILED Mar 25, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1481 KENMORE ST 21202 OLEAN BLVD. **UNIT B1 & B6** PORT CHARLOTTE, FL 33952 PORT CHARLOTTE, FL 33952 **Current Mailing Address: New Mailing Address:** 1481 KENMORE ST PORT CHARLOTTE, FL 33952 FEI Number: 65-1078556 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DAVILA, JOSE N 1481 KÉNMORE ST PORT CHARLOTTE, FL 33952 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DP () Change () Addition () Delete DAVILA, JOSE N Name: Name: 1481 KENMORE ST Address: Address: City-St-Zip: PORT CHARLOTTE, FL 33952 City-St-Zip: Title: DV () Delete Title: () Change () Addition Name: DAVILA, JODY A Name: Address: 1481 KENMORE ST Address: City-St-Zip: PORT CHARLOTTE, FL 33952 City-St-Zip: Title: () Delete Title: (X) Change () Addition JONES, JOHNNY L Name: RUBIN, NANCY Name: Address: 1748 SE 7TH ST Address: 1488 FORND CR. City-St-Zip: HOMESTEAD, FL 33030 City-St-Zip: PORT CHARLOTTE, FL 33952 Title: () Delete Title: () Change () Addition Name: LINDBACK, KATHY Name: Address: 2240 KEEN TRAIL Address: City-St-Zip: PORT CHARLOTTE, FL 33952 City-St-Zip: Title: () Delete Title: () Change () Addition LINDBACK, CHARLES Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: JOSE N. DAVILA DP 03/25/2004