

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003760

Entity Name: GLOBAL PARTNERSHIP MINISTRIES, INC

FILED  
Aug 19, 2004  
Secretary of State

## Current Principal Place of Business:

8565 MALLORY RD.  
SUITE 600  
JACKSONVILLE, FL 32220

## New Principal Place of Business:

7979 RAMONA BLVD WEST  
JACKSONVILLE, FL 32221

## Current Mailing Address:

PO BOX 207  
JACKSONVILLE, FL 32220

## New Mailing Address:

PO BOX 6724  
JACKSONVILLE, FL 32236 67

FEI Number: 59-3719141

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OLSON, MICHAEL R  
5970 OTTER CREEK CT  
JACKSONVILLE, FL 32222 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: OLSON, MICHAEL R  
Address: 5970 OTTER CREEK CT  
City-St-Zip: JACKSONVILLE, FL 32222

Title: D ( ) Delete  
Name: OLSON, JOSHUA F  
Address: 5970 OTTER CREEK CT  
City-St-Zip: JACKSONVILLE, FL 32222

Title: D ( ) Delete  
Name: WHITE, DONALD  
Address: 800 HAMMOND BLVD  
City-St-Zip: JACKSONVILLE, FL 32221

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: MESSER, THOMAS C DR.  
Address: 8974 MOSEY ALONG CT.  
City-St-Zip: JACKSONVILLE, FL 32221

Title: D (X) Change ( ) Addition  
Name: SHOEMAKER, CHARLES T DR.  
Address: 10482 HAMLET TERR  
City-St-Zip: JACKSONVILLE, FL 32221

Title: D ( ) Change (X) Addition  
Name: SPRINGER, RICHARD REV.  
Address: 6121 COLLINS RD # 201  
City-St-Zip: JACKSONVILLE, FL 32244

Title: D ( ) Change (X) Addition  
Name: KELNHOFER, BRUCE REV.  
Address: 800 HAMMOND BLVD  
City-St-Zip: JACKSONVILLE, FL 32221

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: MICHAEL R. OLSON

D

08/19/2004

Electronic Signature of Signing Officer or Director

Date