

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 16, 2004 8:00 am**  
**Secretary of State**

04-16-2004 90122 045 \*\*\*\*61.25

**DOCUMENT # N01000004020**

1. Entity Name

**GOD'S SONG MINISTRIES INTERNATIONAL, INC.**



Principal Place of Business

**2822 OKEECHOBEE BLVD  
WEST PALM BEACH FL 33409**

Mailing Address

**2822 OKEECHOBEE BLVD  
WEST PALM BEACH FL 33409**

**24045256**



MOORE

CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**65-1115168**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CHAMBERS, CHARLES JR  
2822 OKEECHOBEE BLVD  
WEST PALM BEACH FL 33409**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete  
NAME **CHAMBERS, CHARLES JR**  
STREET ADDRESS **2822 OKEECHOBEE BLVD**  
CITY-ST-ZIP **WEST PALM BEACH FL 33409**

TITLE **S** ☐ Delete  
NAME **CHAMBERS, BEVERLY**  
STREET ADDRESS **2822 OKEECHOBEE BLVD**  
CITY-ST-ZIP **WEST PALM BEACH FL 33409**

TITLE **D** ☐ Delete  
NAME **WIDDOWS, EDWIN**  
STREET ADDRESS **3267 DIAMONDHEAD LN**  
CITY-ST-ZIP **LANTANA FL 33462**

TITLE **D** ☐ Delete  
NAME **WIDDOWS, JUDY**  
STREET ADDRESS **3267 DIAMONDHEAD LN**  
CITY-ST-ZIP **LANTANA FL 33462**

TITLE **D** ☐ Delete  
NAME **KUNALA, JILL**  
STREET ADDRESS **640 CASTILLA LN**  
CITY-ST-ZIP **BOYNTON BEACH FL 33435**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Charles Chambers P**

Date

**4/14/04**

Daytime Phone #

**561-686-9215**