

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004494

Entity Name: GREATER FAITH MINISTRIES INC.

FILED
May 04, 2004
Secretary of State

Current Principal Place of Business:

982 NW 79 STREET
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

1545 NE 153 TERR
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 65-1120738

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, ISIAH JR
1545 NE 153 TERR
NORTH MIAMI BEACH, FL 33162

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: JONES, ISIAH JR
Address: 1545 NE 153 TERR
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: S () Delete
Name: JONES, PAMELA
Address: 1545 NE 153 TERR
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: T () Delete
Name: PURNELL, CHANTE
Address: 1545 NE 153 TERR
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: T () Delete
Name: FOREMAN, VERA
Address: 1289 WALKER RD
City-St-Zip: DOVER, DE 19904

Title: T () Delete
Name: JONES, ISIAH III
Address: 1545 NE 153 TERR
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D () Delete
Name: LITTLE, BRANDON
Address: 1289 WALKER RD
City-St-Zip: DOVER, DE 19904

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
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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: ISIAH JONES JR.

P

05/04/2004

Electronic Signature of Signing Officer or Director

Date