

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005089

FILED  
Mar 22, 2005  
Secretary of State

Entity Name: ALLEN GRIFFIN MINISTRIES, INC.

## Current Principal Place of Business:

9013 WEST RIDGE COURT  
FT MYERS, FL 33912

## New Principal Place of Business:

1687 WEST GRANADA BLVD  
ORMOND BEACH, FL 32174

## Current Mailing Address:

PO BOX 61058  
FT MYERS, FL 33906

## New Mailing Address:

PO BOX 731439  
ORMOND BEACH, FL 32173

FEI Number: 65-1122731

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEEYEE, ADELBERT  
12430 NE 2ND COURT  
NORTH MIAMI, FL 33161 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: PD ( ) Delete  
Name: GRIFFIN, ALLEN  
Address: 9013 WEST RIDGE COURT  
City-St-Zip: FT MYERS, FL 33912

Title: VD ( ) Delete  
Name: YEE, ADELBERT LEE  
Address: 12430 NE 2ND COURT  
City-St-Zip: NORTH MIAMI, FL 33161

Title: SD ( ) Delete  
Name: MITCHELL, LESTER  
Address: 15863 NW 11TH ST  
City-St-Zip: PEMBROKE PINES, FL 33028

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: GRIFFIN, ALLEN  
Address: 28 ARROYO PARKWAY  
City-St-Zip: ORMOND BEACH, FL 32174

Title: VD (X) Change ( ) Addition  
Name: LEEYEE, ADELBERT  
Address: 12430 NE 2ND COURT  
City-St-Zip: NORTH MIAMI, FL 33161

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: ALLEN GRIFFIN

PD

03/22/2005

Electronic Signature of Signing Officer or Director

Date