## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000005152

Entity Name: HIS WORLD MINISTRY, INC.

FILED Apr 10, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 717 EAST OAK ST KISSIMMEE, FL 43744 **Current Mailing Address: New Mailing Address:** 717 EAST OAK ST KISSIMMEE, FL 43744 FEI Number: 59-3731471 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BAUMRUK, ANDY J 717 EAST OAK ST. KISSIMMEE, FL 43744 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: () Change () Addition () Delete BAUMRUK, VERNON J Name: Name: 717 EAST OAK ST. Address: Address: City-St-Zip: KISSIMMEE, FL 43744 City-St-Zip: Title: VD ( ) Delete Title: () Change () Addition Name: BAUMRUK, MILDRED H Name: Address: 717 EAST OAK ST. Address: City-St-Zip: KISSIMMEE, FL 43744 City-St-Zip: Title: () Delete Title: () Change () Addition BAUMRUK, KELLY S Name: Name: 717 EAST OAK ST. Address: Address: City-St-Zip: KISSIMMEE, FL 43744 City-St-Zip: Title: TD ( ) Delete Title: () Change () Addition Name: BAUMRUK, ANDREW J Name: 717 EAST OAK ST. Address: Address: City-St-Zip: KISSIMMEE, FL 43744 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition FRANZEN, MICHELLE L FRANZEN, MICHELLE L Name: Name: 415 LEMAY AVE. PO BOX 702511 Address: Address: City-St-Zip: **TYLER, TX 75704** City-St-Zip: ST. CLOUD, FL 347702511 Title: () Delete Title: () Change () Addition FABER, ROBERT Name: Name: Address: 1409 LA HERMOSSA DR. Address: THE VILLAGES, FL 32159 City-St-Zip: 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: ANDREW J. BAUMRUK TREA 04/10/2004