2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004
Secretary of State

DOCUMENT# N01000005990

Entity Name: SACRED WAY MINISTRIES, INC.

Current Principal Place of Business:

615 EAST PALMETTO AVENUE
MELBOURNE, FL 32901

New Principal Place of Business:

1369 BLACK WILLOW TRAIL
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

615 EAST PALMETTO AVENUE
MELBOURNE, FL 32901

New Mailing Address:

1369 BLACK WILLOW TRAIL
ALTAMONTE SPRINGS, FL 32714

FEI Number: 31-1805540 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KALINYAK, DEBORAH
615 E. PALMETTO AVE.
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

KALINYAK, DEBORAH
1369 BLACK WILLOW TRAIL
ALTAMONTE SPRINGS, FL 32714 US

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: _____ 04/12/2004
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: RYAN, BARBARA
Address: 615 EAST PALMETTO AVENUE
City-St-Zip: MELBOURNE, FL 32901

Title: D ( ) Delete
Name: VANN, DEBORAH
Address: 615 EAST PALMETTO AVENUE
City-St-Zip: MELBOURNE, FL 32901

Title: D ( ) Delete
Name: KALINYAK, DEBBIE
Address: 615 EAST PALMETTO AVENUE
City-St-Zip: MELBOURNE, FL 32901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition
Name: KALINYAK, DEBBIE
Address: 1369 BLACK WILLOW TRAIL
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: DEBBIE KALINYAK TRES 04/12/2004
Electronic Signature of Signing Officer or Director — Date