2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Feb 03, 2005 08:00 AM **DOCUMENT # N01000006514 Secretary of State** 1. Entity Name EVANGELISM, ESTABLISHING AND EQUIPPING MINISTRIES, INC. Principal Place of Business Mailing Address 2400 KEISER CT PO BOX 2082 TITUSVILLE, FL 32780 TITUSVILLE, FL 32781-2082 01312005 No Chg-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 81-0584917 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BALL, LINDA A DO NOT WRITE 2400 KEISER CT TITUSVILLE, FL 32780 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be П Trust Fund Contribution. Added to Fees Due by May 1, 2005 OFFICERS AND DIRECTORS 10, TITLE U00000213384 NAME BALL, ERIC G JR 02/03/05-80069-003 61.25 STREET ADDRESS 2400 KEISER CT CITY-ST-ZIP TITUSVILLE, FL 32780 TITLE VD. NAME BALL, LINDA A STREET ADDRESS 2400 KEISER CT CITY-ST-ZIP TITUSVILLE, FL 32780 TITLE NAME PATZKE, CHARLOTTE I STREET ADDRESS 142 OJIBWAY AVE DO NOT WRITE CITY-SY-ZIP TITUSVILLE, FL 32780 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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:

CITY-ST-ZIP
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NAME
STREET ADDRESS
CITY-ST-ZIP

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