

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006562

FILED
Apr 16, 2004
Secretary of State**Entity Name:** ZOE MINISTRIES INTERNATIONAL, INC.**Current Principal Place of Business:**P. O. BOX 356
DEERFIELD BCH, FL 33443**New Principal Place of Business:****Current Mailing Address:**P. O. BOX 356
DEERFIELD BCH, FL 33443**New Mailing Address:****FEI Number:** 30-0062833**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MASON, LINDA J
40 N. OSPREY AVE., SUITE D
SARASOTA, FL 34236 US**Name and Address of New Registered Agent:**MAROTTA, JEFF
13060 SILVER BAY CT.
FT. MYERERS, FL 33913 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: JEFF MAROTTA

04/16/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MAROTTA, JEFREY
Address: P. O. BOX 356
City-St-Zip: DEERFIELD BCH, FL 33443

Title: VPD () Delete
Name: MAROTTA, CIRENE
Address: P. O. BOX 356
City-St-Zip: DEERFIELD BCH, FL 33443

Title: SD () Delete
Name: WAL DECK, JOAU PAULO
Address: 5108 NW 11TH DR.
City-St-Zip: DEERFIELD BCH, FL 33064

Title: TD () Delete
Name: CULLEN, THOMAS
Address: 8971 NW 33RD ST.
City-St-Zip: CORAL SPRINGS, FL 33065

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
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: JEFERY MAROTTA

MR.

04/16/2004

Electronic Signature of Signing Officer or Director

Date