2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005
Secretary of State

DOCUMENT# N01000007499

Entity Name: HIT THE MARK MINISTRIES, INC.

Current Principal Place of Business:

120 BRUSHCREEK DR
SANFORD, FL 32771

New Principal Place of Business:

1811 STARGAZER TERRACE
SANFORD, FL 32771

Current Mailing Address:

120 BRUSHCREEK DR
SANFORD, FL 32771

New Mailing Address:

1811 STARGAZER TERRACE
SANFORD, FL 32771

FEI Number: 59-3749945 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, SUSAN J
5200 S US HWY 17-92
CASSELBERRY, FL 32707 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: DV ( ) Delete
Name: BROWN, CLINT S
Address: 120 BRUSHCREEK DR
City-St-Zip: SANFORD, FL 32771

Title: DT ( ) Delete
Name: BAUM, TERRY D
Address: 120 BRUSHCREEK DR
City-St-Zip: SANFORD, FL 32771

Title: DS ( ) Delete
Name: PAYNE, STEPHANIE
Address: 120 BRUSHCREEK DR
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change ( ) Addition
Name: PAYNE, JAMES J
Address: 1811 STARGAZER TERRACE
City-St-Zip: SANFORD, FL 32771

Title: DT (X) Change ( ) Addition
Name: BAUM, TERRY D
Address: 1811 STARGAZER TERRACE
City-St-Zip: SANFORD, FL 32771

Title: DS (X) Change ( ) Addition
Name: PAYNE, STEPHANIE
Address: 1811 STARGAZER TERRACE
City-St-Zip: SANFORD, FL 32771

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: MARK PAYNE PRES 04/22/2005
Electronic Signature of Signing Officer or Director — Date