

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 26, 2004  
Secretary of State**

DOCUMENT# N01000008554

Entity Name: BARNABAS MUSIC MINISTRIES INC.

**Current Principal Place of Business:**

6213 16TH ST S  
ST PETERSBURG, FL 33705

**New Principal Place of Business:**

**Current Mailing Address:**

6213 16TH ST S  
ST PETERSBURG, FL 33705

**New Mailing Address:**

FEI Number: 04-3658793      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DODGE, DAVID A  
6213 16TH ST S  
ST PETERSBURG, FL 33705

**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: D ( ) Delete  
Name: DODGE, DAVID A  
Address: 6213 16TH ST S  
City-St-Zip: ST PETERSBURG, FL 33705

Title: D ( ) Delete  
Name: COREY, ROBERT D  
Address: 3785 105TH AVE. N  
City-St-Zip: CLEARWATER, FL 33762

Title: D ( ) Delete  
Name: MORRIS, DON  
Address: 110 60TH AVE S  
City-St-Zip: ST PETERSBURG, FL 33705

Title: D (X) Delete  
Name: MORRIS, WENDY  
Address: 110 60TH AVE S  
City-St-Zip: ST PETERSBURG, FL 33705

Title: SD ( ) Delete  
Name: NAEDERT, RON  
Address: 3241 47TH TERR N.  
City-St-Zip: SAINT PETERSBURG, FL 33714

**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:

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: DAVID A. DODGE

PRES

04/26/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date