2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 02, 2005 8:00 am
Secretary of State
09-02-2005 90011 039 ****70.00

DOCUMENT # N01000008866

1. Entity Name
BLUESKY MINISTRIES, INC.

Principal Place of Business
3815 SILVER STAR RD
200
ORLANDO, FL 32808

Mailing Address
3815 SILVER STAR RD
200
ORLANDO, FL 32808

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc. | Suite, Apt. #, etc.

City & State | City & State

Zip | Country | Zip | Country

08252005 Chg-NP CR2E037 (10/03)

4. FEI Number: 06-1636880 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TREMAIN, MICHAEL E
1011 PARK LAKE STREET
ORLANDO, FL 32803

7. Name and Address of New Registered Agent

Name: Same (Tremain, Michael E)
Street Address (P.O. Box Number is Not Acceptable): 906 Seville Place
Orlando,
City: FL Zip Code: 32804

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: N/A
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating) DATE

Filing Fee is $61.25 **Due by September 7, 2005**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	**Make check payable to Florida Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	PSTC TREMAIN, MICHAEL E 1011 PARK LAKE STREET ORLANDO, FL 32803	☐ Delete	P/S Tremain, Michael E 906 Seville Place Orlando, FL 32804	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	ED OWENS, WILLIAM D IV 61 LAKE FORREST LANE ATLANTA, GA 30342	☐ Delete	S Owens, William D IV 1486 Epping Forest Dr. Atlanta, GA 30319	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D DAVIES, OWENS W 61 LAKE FORREST LANE ATLANTA, GA 30342	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D SHELTER, BOB DR 106 EAST CHURCH ST ORLANDO, FL 32801	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D BARBER, DON REV 3434 ROSWELL RD NW ATLANTA, GA 30305	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D MCCARTHY, KEVIN PO BOX 1568 WINTER PARK, FL 327901568	☒ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing 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: [signature] W. Davies Owens IV 8/26/05 770-812-1964
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE #