2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000221

FILED Feb 02, 2005 Secretary of State

Entity Name: FRESH WIND INTERNATIONAL CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

579 SW ASTER RD. 5863 NW HANN DRIVE

PORT SAINT LUCIE, FL 34953 PORT SAINT LUCIE, FL 34986

Current Mailing Address: New Mailing Address:

579 SW ASTER ROAD 5863 NW HANN DRIVE PORT ST LUCIE, FL 34953 PORT ST LUCIE, FL 34986

FEI Number: 65-1046480 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LIVINGSTON, CHRISTOPHER

579 SW ASTER ROAD

PORT ST LUCIE, FL 34953 US

SANCHEZ, GERMAN R

5863 NW HANN DRIVE

PORT ST LUCIE, FL 34986 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: GERMAN R SANCHEZ 02/02/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 DP () Delete
 Title:
 DP (X) Change () Addition

 Name:
 LIVINGSTON, CHRISTOPHER
 Name:
 SANCHEZ, GERMAN R

 Address:
 579 SW ASTER ROAD
 Address:
 5863 NW HANN DRIVE

Address: 5/9 SW ASTER ROAD Address: 5863 NW HANN DRIVE

City-St-Zip: PORT ST LUCIE, FL 34953 City-St-Zip: PORT ST LUCIE, FL 34986

Title: DV () Delete Title: DV (X) Change () Addition Name: LIVINGSTON, AMBER Name: PEREZ, MAYRA E Address: 579 SW ASTER ROAD Address: 5863 NW HANN DRIVE

City-St-Zip: PORT ST LUCIE, FL 34953 City-St-Zip: PORT ST LUCIE, FL 34986

Title: DT () Delete Title: DT (X) Change () Addition Name: SANITO, JOE Name: SANITO, JOSEPH

 Name:
 SANITO, JOSEPH

 Address:
 416 SW HORSESHOE BAY
 Address:
 416 SW HORSESHOE BAY

 City-St-Zip:
 PORT ST LUCIE, FL 34986
 City-St-Zip:
 PORT ST LUCIE, FL 34986

Title: C () Delete Title: () Change () Addition

 Name:
 CHRISTENSEN, JANICE
 Name:

 Address:
 4606 PALMETTO DR.
 Address:

 City-St-Zip:
 FORT PIERCE, FL 34982
 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: GERMAN R SANCHEZ DP 02/02/2005

Electronic Signature of Signing Officer or Director

Date