

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001049

FILED  
Apr 30, 2006  
Secretary of State

**Entity Name:** THE SOWING CIRCLE MINISTRIES, INC.

**Current Principal Place of Business:**

8358 WEST OAKLAND PARK BLVD., STE 303  
SUNRISE, FL 33351

**New Principal Place of Business:**

**Current Mailing Address:**

11810 HIGHLAND PLACE  
CORAL SPRINGS, FL 33071

**New Mailing Address:**

**FEI Number:** 65-1083282

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EZELL, EMOGENE  
11810 HIGHLAND PLACE  
CORAL SPRINGS, FL 33071 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: P ( ) Delete  
Name: EZELL, JEAN  
Address: 11810 HIGHLAND PLACE  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: WOODS, RITA  
Address: 10260 COUNTY ROAD 9  
City-St-Zip: LISMAN, AL 39612

Title: D ( ) Change (X) Addition  
Name: WOODS, LORETTA  
Address: 4121 VIOLA AVE  
City-St-Zip: BIRMINGHAM, AL 35221

Title: D ( ) Change (X) Addition  
Name: REESE, MILLY  
Address: 1597 MALLARD COURT  
City-St-Zip: JONESBORO, GA 30238

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JEAN EZELL

P

04/30/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date