

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002004

FILED
Aug 25, 2005
Secretary of State

Entity Name: SPIRIT FREE MINISTRIES INCORPORATED

Current Principal Place of Business:

6401 S WESTSHORE BLVD
#1419
TAMPA, FL 33616

New Principal Place of Business:

Current Mailing Address:

6401 S WESTSHORE BLVD
#1419
TAMPA, FL 33616

New Mailing Address:

FEI Number: 03-0420205 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SEGER, CAROLE
6401 S WESTSHORE BLVD
#1419
TAMPA, FL 33616 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: PD () Delete
Name: SEGER, GARY L
Address: 6401 S WESTSHORE BLVD #1419
City-St-Zip: TAMPA, FL 33616

Title: VPD () Delete
Name: JOHNSON, JOHNATHAN W
Address: 4800 S WESTSHORE BLVD #202
City-St-Zip: TAMPA, FL 33611

Title: SEC () Delete
Name: HILL, JESSICA
Address: 6401 S WESTSHORE BLVD #719
City-St-Zip: TAMPA, FL 33616

Title: D () Delete
Name: JOHNSON, TAMMY
Address: 4613 SOUTH MATANZAS AVENUE
City-St-Zip: TAMPA, FL 33611

Title: D () Delete
Name: TROTTER, ROBERT
Address: 3815 NORTH OAK DRIVE APT. G-71
City-St-Zip: TAMPA, FL 33611

Title: TRES () Delete
Name: SEGER, CAROLE M
Address: 6401 S WESTSHORE BLVD #1419
City-St-Zip: TAMPA, FL 33616

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:

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: CAROLE M SEGER

TRES

08/25/2005

Electronic Signature of Signing Officer or Director

Date