2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005
Secretary of State

DOCUMENT# N02000003448

Entity Name: PASSAGE MINISTRIES, INC.

Current Principal Place of Business:

11503 N.W. 136TH STREET
ALACHUA, FL 32615

New Principal Place of Business:

2020 N.E. 15TH STREET
GAINESVILLE, FL 32609

Current Mailing Address:

11503 N.W. 136TH STREET
ALACHUA, FL 32615

New Mailing Address:

P. O. BOX 695
GAINESVILLE, FL 32602

FEI Number: 36-4491241 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

DIX, GEORGE B JR.
11503 N.W. 136TH STREET
ALACHUA, FL 32615 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: PT ( ) Delete
Name: DIX, GEORGE B JR.
Address: 11503 N.W. 136TH STREET
City-St-Zip: ALACHUA, FL 32615

Title: VT ( ) Delete
Name: DIX, ROSALYN M
Address: 11503 N.W. 136TH STREET
City-St-Zip: ALACHUA, FL 32615

Title: STT ( ) Delete
Name: HUTCHINSON, ORAN C
Address: 3113 N.W. 53RD DRIVE
City-St-Zip: GAINESVILLE, FL 32606

Title: T ( ) Delete
Name: GRAHAM, HOLLIE
Address: 618 SE 14TH TERR
City-St-Zip: GAINESVILLE, FL 32641

Title: T ( ) Delete
Name: CHISM, GERALD
Address: 13306 NW 150TH AVE
City-St-Zip: ALACHUA, FL 32616

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: ROSALYN M. DIX VT 05/04/2005

Electronic Signature of Signing Officer or Director — Date