2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003539

Entity Name: DIVA OF DIVINITY MINISTRIES, INC.

FILED Jul 27, 2004 Secretary of State

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

706 8TH STREET 3001 BERNARDO LANE

WEST PALM BEACH, FL 33401 WEST PALM BEACH, FL 33407

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 1822 WEST PALM BEACH, FL 33402

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

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

EGBULONU, DONALD
706 8TH STREET
3001 BERNARDO LANE

WEST PALM BEACH, FL 33401 WEST PALM BEACH, FL 33407

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: DONALD C. EGBULONU 07/27/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 EGBULONU, KIMBERLY
 Name:
 EGBULONU, KIMBERLY

 Address:
 706 8TH STREET
 Address:
 3001 BERNARDO LANE

 City-St-Zip:
 WEST PALM BEACH, FL 33401
 City-St-Zip:
 WEST PALM BEACH, FL 33407

Title: SD () Delete Title: () Change () Addition

Name: HARRIS, LAURIE Name:

Address: 4491 WILLOW POND ROAD Address: City-St-Zip: WEST PALM BEACH, FL 33417 City-St-Zip:

Title: TD () Delete Title: () Change () Addition

 Name:
 MCKINZY, MARY
 Name:

 Address:
 1099 W. 27TH STREET
 Address:

 City-St-Zip:
 RIVIERA BEACH, FL 33404
 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: KIMBERLY C. EGBULONU PD 07/27/2004