2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003862

FILED Mar 20, 2006 Secretary of State

Entity Name: REDEEMED OF CHRIST MINISTRIES INC

O 15	luinainal Place e	f Business	Novy Daine	singl Dloss of Business
Current P	rincipal Place o	r business:	New Princ	cipal Place of Business:
	SUMA ST ATER, FL 33756			
Current N	lailing Address:	:	New Maili	ing Address:
12693 OA _ARGO, F				
FEI Number	: 03-0445805	FEI Number Applied For()	FEI Number Not App	Olicable () Certificate of Status Desired ()
Name and	d Address of Cu	rrent Registered Agent:	Name and	d Address of New Registered Agent:
DROLET, 12693 OA LARGO, F	K ST.			
	e named entity su e of Florida.	bmits this statement for the	purpose of changing i	its registered office or registered agent, or b
	e of Florida.	bmits this statement for the	purpose of changing i	its registered office or registered agent, or b
n the Stat	e of Florida. RE:	bmits this statement for the positions of Registered Ag		its registered office or registered agent, or b Date
n the Stat SIGNATU	e of Florida. RE:	Signature of Registered Ag	ent	
n the Stat BIGNATU DFFICER Fitle: Name: Address:	e of Florida. RE: Electronic	Signature of Registered Ag ORS: elete W G	ent	Date
n the Stat BIGNATU DFFICER Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	e of Florida. RE: Electronic S AND DIRECTO PRES () D ACKER, MATTHEN 1523 SATSUMA S	Signature of Registered Ag DRS: elete W G IT L 33756 elete S R	ent ADDITION Title: Name: Address:	Date NS/CHANGES TO OFFICERS AND DIREC
n the Stat SIGNATU	e of Florida. RE: Electronic S AND DIRECTO PRES () D ACKER, MATTHEY 1523 SATSUMA S CLEARWATER, F VP () D DROLET, DENNIS 12693 OAK ST	Signature of Registered Ag DRS: elete W G T L 33756 elete B R 4 elete	ent ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	Date NS/CHANGES TO OFFICERS AND DIREC () Change () Addition

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: DENNIS DROLET VP 03/20/2006