## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000005128

Entity Name: ARISE AND SHINE GLORY MINISTRIES, INC.

Apr 22, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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280 IOWA AVE 5553 N STATE ROAD 7

FT. LAUDERDALE, FL 33312 FT. LAUDERDALE, FL 33319

**Current Mailing Address: New Mailing Address:** 

P.O. BOX934722 280 IOWA AVE FT. LAUDERDALE, FL 33312 MARGATE, FL 33093

FEI Number: 56-2294768 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

ROSEGREEN, ANSEL ROSEGREEN, ANSEL 280 IOWA AVÉ 1921 NW 35TH AVENUE

FT. LAUDERDALE, FL 33312 US COCONUT CREEK, FL 33066 US

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: 04/22/2005

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete (X) Change ( ) Addition

ROSEGREEN, ANSEL ROSEGREEN, ANSEL Name: Name:

280 IOWA AVE. Address: 1921 NW 35TH AVE Address: City-St-Zip: FT. LAUDERDALE, FL 33312 City-St-Zip: COCONUT CREEK, FL 33066

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

ROSEGREEN, NORMA Name: ROSEGREEN, NORMA Name:

Address: 280 IOWA AVE Address: 1921 NW 35TH AVE City-St-Zip: FORT LAUDERDALE, FL 33312 City-St-Zip: COCONUT CREEK, FL 33066

Title: () Change () Addition

Title: () Delete BROWN, WILLIAM Name: Name:

4229 52ND AVE. Address: Address: City-St-Zip: LAUDERDALE LAKES, FL 33319 City-St-Zip:

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

Name: MCLEAN, VERNICE Name: 4712 NW 44TH ST. Address: Address: City-St-Zip: TAMARAC, FL 33319 City-St-Zip:

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

SMITH, JOYCE SMITH, JOYCE Name: Name: 4735 NW 4 ST. 5907 POLK STREET Address: Address: PLANTATION, FL 33317 City-St-Zip: City-St-Zip: HOLLYWOOD, FL 33021

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: ANSEL ROSEGREEN D 04/22/2005