

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006182

FILED
Jan 11, 2005
Secretary of State

Entity Name: DAVE THOMPSON GOSPEL MINISTRIES, INC.

Current Principal Place of Business:

1309 VALPARAISO BLVD.
NICEVILLE, FL 32578

New Principal Place of Business:

Current Mailing Address:

1309 VALPARAISO BLVD.
NICEVILLE, FL 32578

New Mailing Address:

FEI Number: 03-0482036

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, DAVID L
1309 VALPARAISO BLVD.
NICEVILLE, FL 32578 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: TBM () Delete
Name: HUMPHRIES, LEV L
Address: 1308 RATTAN PALM DR
City-St-Zip: NICEVILLE, FL 32578

Title: BM () Delete
Name: THOMPSON, LARRY L
Address: 2933 W SAGINAW RD
City-St-Zip: MAYVILLE, MI 48744

Title: BM () Delete
Name: HILL, JOHN
Address: 8050 FOUNTAINS LANE
City-St-Zip: DESTIN, FL 32541

Title: TBM () Delete
Name: RICHARDS, MIKE
Address: 113 BRIAN DR
City-St-Zip: CRESTVIEW, FL 32536

Title: DP () Delete
Name: THOMPSON, DAVID
Address: 1309 VALPARAISO BLVD
City-St-Zip: NICEVILLE, FL 32578

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: DAVID L. THOMPSON

DP

01/11/2005

Electronic Signature of Signing Officer or Director

Date