

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006389

Entity Name: DOUG REED MINISTRIES INC.

FILED
Apr 29, 2004
Secretary of State

Current Principal Place of Business:

251 N.W. 9TH STREET
BOCA RATON, FL 334322633

New Principal Place of Business:

Current Mailing Address:

251 N.W. 9TH STREET
BOCA RATON, FL 334322633

New Mailing Address:

FEI Number: 76-0722148

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REED, DOUGLAS
251 N.W. 9TH STREET
BOCA RATON, FL 334322633

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: P () Delete
Name: REED, DOUGLAS
Address: 251 N.W. 9TH STREET
City-St-Zip: BOCA RATON, FL 334322633

Title: VST () Delete
Name: REED, JEANNE
Address: 251 N.W. 9TH STREET
City-St-Zip: BOCA RATON, FL 334322633

Title: T () Delete
Name: HICKMAN, LEE
Address: 601 CAMELOT DR
City-St-Zip: LIBERTY, MO 64068

Title: D () Delete
Name: NORDAN, GRAY
Address: 902 VICTORY LN
City-St-Zip: EXCELSIOR SPRINGS, MO 64024

Title: D () Delete
Name: WINSTON, BUI
Address: 1712 IRIS DR
City-St-Zip: COLUMBIA, MO 65202

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: JEANNE REED

VST

04/29/2004

Electronic Signature of Signing Officer or Director

Date