2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006563

5465 CURRY FORD #H5

ORLANDO, FL 32812

Address:

City-St-Zip:

FILED Apr 28, 2004 Secretary of State

Entity Name: DUNAMIS ETERNAL FULL GOSPEL FELLOWSHIP MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business: 5851 FOLKSTONE LANE 3520 SOUTH ORANGE AVENUE ORLANDO, FL 32822 ORLANDO, FL 32806 **Current Mailing Address: New Mailing Address:** 5851 FOLKSTONE LANE 4980 DOVER CIRCLE ORLANDO, FL 32822 ORLANDO, FL 32807 **FEI Number:** FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HOLMES, VINCENT B REV HOLMES, VINCENT B REV 5851 FOLKSTONE LANE 4980 DOVER CIRCLE ORLANDO, FL 32822 ORLANDO, FL 32807 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: 04/28/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete HOLMES, VINCENT B REV HOLMES, VINCENT B REV Name: Name: 5851 FOLKSTONE LANE Address: 4980 DOVER CIRCLE Address: City-St-Zip: ORLANDO, FL 32822 City-St-Zip: ORLANDO, FL 32807 Title: () Delete Title: (X) Change () Addition Name: HOLMES, LORNANT D REV Name: HOLMES, LORNA D REV Address: 5851 FOLKSTONE LANE Address: 4980 DOVER CIRCLE City-St-Zip: ORLANDO, FL 32822 City-St-Zip: ORLANDO, FL 32807 Title: () Delete Title: () Change () Addition BLEUS, JEAN I Name: Name: Address: 1848 DUNWOODIE ST Address: City-St-Zip: ORLANDO, FL 32839 City-St-Zip: Title: TD () Delete Title: () Change () Addition Name: THOMAS, TREVOR S Name:

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.

Address:

City-St-Zip:

SIGNATURE: VINCENT B HOLMES PD 04/28/2004