2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 16, 2005
Secretary of State

DOCUMENT# N02000007417

Entity Name: GREATER FAITH IN GOD MINISTRIES, INC.

Current Principal Place of Business:

1225 SW GRANDVIEW ST
LAKE CITY, FL 32025

New Principal Place of Business:

Current Mailing Address:

209 NW SPARR RD
LAKE CITY, FL 32055

New Mailing Address:

FEI Number: 55-0802546 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

O'NEAL, TONYA
209 NW SPARR RD
LAKE CITY, FL 32055 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: PD ( ) Delete
Name: O'NEAL, TONYA
Address: 209 NW SPARR RD
City-St-Zip: LAKE CITY, FL 32055

Title: V ( ) Delete
Name: THOMAS, JUDY
Address: 10644 155TH LANE
City-St-Zip: LIVE OAK, FL 32060

Title: SD ( ) Delete
Name: O'NEAL, ROBERT
Address: 209 NW SPARR RD
City-St-Zip: LAKES CITY, FL 32055

Title: TD ( ) Delete
Name: O'NEAL, ROBERT
Address: 209 NW SPARR RD
City-St-Zip: LAKE CITY, FL 32055

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:

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: TONYA O'NEAL PD 05/16/2005

Electronic Signature of Signing Officer or Director — Date