

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007757

FILED
May 23, 2004
Secretary of State

Entity Name: CASON MCCLAIN GOSPEL PROMOTIONS, INC.

Current Principal Place of Business:

197 GARY AVE.
OAK HILL, FL 32759

New Principal Place of Business:

3003 KUMQUAT DR.
EDGEWATER, FL 327141

Current Mailing Address:

197 GARY AVE.
OAK HILL, FL 32759

New Mailing Address:

3003 KUMQUAT DR.
EDGEWATER, FL 32141

FEI Number: 56-2297097

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCLAIN, CASON C
197 GARY AVE
OAK HILL, FL 32759

Name and Address of New Registered Agent:

MCCLAIN, CASON C
3003 KUMQUAT DR.
EDGEWATER, FL 32141

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:

05/23/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCCLAIN, CASON
Address: 197 GARY AVE.
City-St-Zip: OAK HILL, FL 32759

Title: D () Delete
Name: MCCLAIN, JESSIE H
Address: 197 GARY AVE.
City-St-Zip: OAK HILL, FL 32759

Title: D () Delete
Name: EVANS, RHONDA D
Address: 2744 UMBRELLA TREE DR.
City-St-Zip: EDGEWATER, FL 32141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MCCLAIN, CASON C
Address: 3003 KUMQUAT DR.
City-St-Zip: EDGEWATER, FL 32141

Title: D (X) Change () Addition
Name: MCCLAIN, JESSIE H
Address: 3003 KUMQUAT DR.
City-St-Zip: EDGEWATER, FL 32141

Title: D (X) Change () Addition
Name: EVANS, RHONDA M
Address: 2744 UMBRELLA TREE DR.
City-St-Zip: EDGEWATER, FL 32141

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: CASON C MCCLAIN

PRES

05/23/2004

Electronic Signature of Signing Officer or Director

Date