2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2005
Secretary of State

DOCUMENT# N02000008376

Entity Name: THE FLAMING FIRE OF GOD MINISTRIES INTERNATIONAL, INC.

Current Principal Place of Business:

6765 IDLEWILD ST
FT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

6765 IDLEWILD ST
FT MYERS, FL 33912

New Mailing Address:

FEI Number: 47-0884687 **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:

GRADY, PATRICK
6765 IDLEWILD ST
FT MYERS, FL 33912 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: P ( ) Delete
Name: LUBANSA, BILLY A.D.M. REV.DR.
Address: 6308 PANTHER LN APT C7
City-St-Zip: FT MYERS, FL 33919

Title: D ( ) Delete
Name: PENA, NARCISO C EVANGEL
Address: 433 S W 20 PL
City-St-Zip: CAPE CORAL, FL 33914

Title: D ( ) Delete
Name: GRADY, PATRICK BROTHER
Address: 6765 IDLEWILD ST
City-St-Zip: FT MYERS, FL 33912

Title: D ( ) Delete
Name: GRADY, WENDY SISTER
Address: 6765 IDLEWILD ST
City-St-Zip: FT MYERS, FL 33912

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: BILLY LUBANSA P 07/11/2005
Electronic Signature of Signing Officer or Director — Date