

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009009

FILED
Apr 28, 2005
Secretary of State

Entity Name: AMBASSADORS MINISTRIES INTERNATIONAL, INC.

Current Principal Place of Business:

PO BOX 954086
LAKE MARY, FL 32795

New Principal Place of Business:

Current Mailing Address:

PO BOX 954086
LAKE MARY, FL 32795

New Mailing Address:

FEI Number: 54-2069806

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KURT, BREWER F ESQ.
400 W. CHURCH ST.
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

BREWER, KURT FORREST ESQ.
2300 CURRY FORD ROAD
ORLANDO, FL 32806 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: KURT FORREST BREWER

04/28/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D,P () Delete
Name: GRIEGER, MARKUS
Address: PO BOX 954086
City-St-Zip: LAKE MARY, FL 32795

Title: D () Delete
Name: GRIEGER, ANNE
Address: PO BOX 954086
City-St-Zip: LAKE MARY, FL 32795

Title: D () Delete
Name: WU, DANIEL
Address: PO BOX 954086
City-St-Zip: LAKE MARY, FL 32795

Title: S () Delete
Name: MILLER, GRACIELA
Address: PO BOX 954086
City-St-Zip: LAKE MARY, FL 32795

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: MARKUS GRIEGER

P

04/28/2005

Electronic Signature of Signing Officer or Director

Date