

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009009

FILED
Apr 28, 2006
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:

PO BOX 954086
LAKE MARY, FL 32795 US

Current Mailing Address:

PO BOX 954086
LAKE MARY, FL 32795

New Mailing Address:

PO BOX 954086
LAKE MARY, FL 32795 US

FEI Number: 54-2069806

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Title: D () Delete
Name: WILSON, JONATHAN
Address: 3400 WILLIAM D. TATE AVE.
City-St-Zip: GRAPEVINE, TX 76051

Title: D () Delete
Name: MILLER, HERBERT J
Address: 1398 STANFIELD COVE
City-St-Zip: HEATHROW, FL 32746

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:

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 Chapter 119, 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

D,P

04/28/2006

Electronic Signature of Signing Officer or Director

Date