

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009204

FILED
Feb 29, 2004
Secretary of State**Entity Name:** SACRED WORSHIP INTERNATIONAL MINISTRIES, INC.**Current Principal Place of Business:**512 MODEL ST.
DAYTONA BEACH, FL 32114**New Principal Place of Business:****Current Mailing Address:**512 MODEL ST.
DAYTONA BEACH, FL 32114**New Mailing Address:****FEI Number:** 87-0715358**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BUTTS, SAMUEL L
512 MODEL ST.
DAYTONA BEACH, FL 32114**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: BUTTS, SAMUEL L
Address: 512 MODEL ST.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: AD () Delete
Name: RAVAIN, MICHAEL
Address: 860 LAMBERT AVE.
City-St-Zip: FLAGLER BEACH, FL 32136

Title: TD () Delete
Name: GRACE, PATRICIA
Address: 1476 VINE ST.
City-St-Zip: HOLLY HILL, FL 32117

Title: SD () Delete
Name: BUTTS, ROSE M
Address: 512 MODEL ST.
City-St-Zip: DAYTONA BEACH, FL 32114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BUTTS, SAMUEL L
Address: 512 MODEL ST.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: O (X) Change () Addition
Name: RAVAIN, MICHAEL
Address: 860 LAMBERT AVE.
City-St-Zip: FLAGLER BEACH, FL 32136

Title: T (X) Change () Addition
Name: GRACE, PATRICIA
Address: 1476 VINE ST.
City-St-Zip: HOLLY HILL, FL 32117

Title: S (X) Change () Addition
Name: BUTTS, ROSE M
Address: 512 MODEL ST.
City-St-Zip: DAYTONA BEACH, FL 32114

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: SAMUEL L BUTTS

P

02/29/2004

Electronic Signature of Signing Officer or Director

Date