


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 15, 2006 8:00 am
Secretary of State

02-15-2006 90051 014 ****70.00

DOCUMENT # N03000000707	
1. Entity Name L J MINISTRIES, INC.	

Principal Place of Business 4925 LANCER DR. SEBRING, FL 33876	Mailing Address 4925 LANCER DR. SEBRING, FL 33876
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DO NOT WRITE IN THIS SPACE



02012006 No Chg-NP CR2E037 (11/05)

4. FEI Number 81-0593185 NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent RITENOUR, ANTHONY L 551 SOUTH COMMERCE AVE. SEBRING, FL 33870
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OVERFIELD, LARRY J 4925 LANCER DR. SEBRING, FL 33876
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OVERFIELD, MARY A 4925 LANCER DR. SEBRING, FL 33876
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OVERFIELD, SHANE E 12651 GLEN ABBEY GRAND ISLAND, FL 32735
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OVERFIELD, JENNIFER C 12651 GLEN ABBEY GRAND ISLAND, FL 32735
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCKAY, ROBERT 1401 PALM DRIVE LORIDA, FL 33857
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCKAY, CONNIE 1401 PALM DRIVE LORIDA, FL 33857

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Larry J. Overfield Feb. 2, 2006 863-381-8921

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #