

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000729

FILED  
Apr 18, 2005  
Secretary of State

Entity Name: RESCUE MINISTRIES INTERNATIONAL, INC.

**Current Principal Place of Business:**

P.O. BOX 90791  
LAKELAND, FL 338040791 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 90791  
LAKELAND, FL 338040791 US

**New Mailing Address:**

FEI Number: 03-0499047

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROSARIO, HERMEL D  
140 BONNIE DR. EAST  
LAKELAND, FL 33801 US

**Name and Address of New Registered Agent:**

DEL ROSARIO, HERMEL  
140 LAKE BONNIE DR. EAST  
LAKELAND, FL 33801 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: HERMEL DEL ROSARIO

04/18/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: REV ( ) Delete  
Name: DEL ROSARIO, HERMEL  
Address: 140 LAKE BONNIE DR. E  
City-St-Zip: LAKELAND, FL 33801

Title: REV ( ) Delete  
Name: DEL ROSARIO, LESLIE  
Address: 140 LAKE BONNIE DR. E.  
City-St-Zip: LAKELAND, FL 33801

Title: D ( ) Delete  
Name: MITCHELL, LARRY  
Address: 4320 OLD COLONY RD.  
City-St-Zip: MULBERRY, FL 33860

**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:

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: HERMEL DEL ROSARIO

REV

04/18/2005

Electronic Signature of Signing Officer or Director

Date