2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# N03000000802

Entity Name: SAFARI WILD INTERNATIONAL MINISTRIES, INC.

Current Principal Place of Business:

6034 SW 9 PLACE #B
GAINESVILLE, FL 32607

New Principal Place of Business:

Current Mailing Address:

6034 SW 9 PLACE #B
GAINESVILLE, FL 32607

New Mailing Address:

FEI Number: 20-0740075 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GENTILMAN, CRIS
6034 SW 9 PLACE #B
GAINESVILLE, FL 32607 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 ( ) Delete
Name: GENTILMAN, CRIS
Address: 6034 SW 9 PLACE #B
City-St-Zip: GAINESVILLE, FL 32607

Title: D ( ) Delete
Name: GENTILMAN, CATHERINE
Address: 6034 SW 9 PLACE #B
City-St-Zip: GAINESVILLE, FL 32607

Title: D ( ) Delete
Name: KRAMES, BRENDA
Address: 8215 NW 4 PLACE
City-St-Zip: GAINESVILLE, FL 32607

Title: D ( ) Delete
Name: HARP, DIANE
Address: 12510 W. UNIVERSITY AVENUE
City-St-Zip: NEWBERRY, FL 32669

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: CRIS GENTILMAN PRES 04/29/2005

Electronic Signature of Signing Officer or Director — Date