## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000001079

Name:

Address:

City-St-Zip:

MORRISON, DENNIS

3600 S BRISTOL ST

COSTA MESA, CA

FILED Sep 09, 2004 Secretary of State

Entity Name: PALONDRA GROUP MINISTRIES, INC. **Current Principal Place of Business: New Principal Place of Business:** 6 VALENCIA DR BOYNTON BCH, FL 33436 **Current Mailing Address: New Mailing Address:** 6 VALENCIA DR BOYNTON BCH, FL 33436 FEI Number: 37-1463371 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RODRIGUEZ, RODRIGO JOHN A LAUDADIO CPA PA 11555 HERON BAY BLVD SUITE 200 6 VALENCIA DR BOYNTON BCH, FL 33436 CORAL SPRINGS, FL 33076 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: JOHN A LAUDADIO 09/09/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete LAFERLA, GARY Name: Name: Address: 4160 WESTBOURNE BLVD Address: City-St-Zip: **COPLEY, OH 44321** City-St-Zip: Title: () Delete Title: () Change () Addition RODRIGUEZ, RODRIGO Name: Name: Address: 6 VALENCIA DR Address: BOYNTON BCH, FL 33436 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition RODRIGUEZ, MARY Name: Name: Address: 6 VALENCIA DR Address: City-St-Zip: BOYNTON BCH, FL 33436 City-St-Zip: Title: ( ) Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MARY RODRIGUEZ D 09/09/2004