2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 09, 2005
Secretary of State

DOCUMENT# N03000002464

Entity Name: GOOD NEWS WORLD MISSION, INC.

Current Principal Place of Business:

8308 N GRADY AVE
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

8308 N GRADY AVE
TAMPA, FL 33614

New Mailing Address:

FEI Number: 75-3107140 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DA SILVA, ANTONIO
8308 N GRADY AVE
TAMPA, FL 33614 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: P ( ) Delete
Name: DA SILVA, ANTONIO
Address: 8308 N GRADY AVE
City-St-Zip: TAMPA, FL 33614

Title: V ( ) Delete
Name: SILVA, THEARA D
Address: 8308 N GRADY AVE
City-St-Zip: TAMPA, FL 33614

Title: T ( ) Delete
Name: DA SILVA, GUSTAVO D
Address: 8308 N GRADY AVE
City-St-Zip: TAMPA, FL 33614

Title: S (X) Delete
Name: ROMUALDO, ANTONIO D
Address: 8308 N GRADY AVE
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: SILVA, THEARA D
Address: 8308 N GRADY AVE
City-St-Zip: TAMPA, FL 33614

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: ANTONIO P. DASILVA P 08/09/2005

Electronic Signature of Signing Officer or Director — Date