

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004282

FILED
May 01, 2005
Secretary of State

Entity Name: THE GRACE OF GOD MINISTRIES, INC.

Current Principal Place of Business:

12015 SW 188 TERR
MIAMI, FL 331773244

New Principal Place of Business:

Current Mailing Address:

12015 SW 188 TERR
MIAMI, FL 331773244

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

BROWN, LORENZO A
12015 SW 188 TERR
MIAMI, FL 331773244 US

Name and Address of New Registered Agent:

BROWN, KERRY-ANN M
12015 SW 188 TERR
MIAMI, FL 331773244 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: KERRY-ANN BROWN

05/01/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BROWN, LORENZO A
Address: 12015 SW 188 TERR
City-St-Zip: MIAMI, FL 331773244

Title: S () Delete
Name: BOYD, CHARLOTTE J
Address: 13725 SW 90TH AVENUE #P202
City-St-Zip: MIAMI, FL 33176

Title: T () Delete
Name: EVANS, EBONI E
Address: 1629 NW 14TH STREET #202
City-St-Zip: MIAMI, FL 33125

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MD (X) Change () Addition
Name: BROWN, LORENZO A
Address: 12015 SW 188 TERR
City-St-Zip: MIAMI, FL 331773244

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

Title: T (X) Change () Addition
Name: CAMPFIELD, LINDA E
Address: 12015 SW 188 TERRACE
City-St-Zip: MIAMI, FL 33177

Title: D () Change (X) Addition
Name: BROWN, KERRY-ANN
Address: 12015 SW 188 TERRACE
City-St-Zip: MIAMI, FL 33177

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: LORENZO BROWN

MD

05/01/2005

Electronic Signature of Signing Officer or Director

Date