

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004520

FILED
Jan 24, 2005
Secretary of State

Entity Name: OPEN ARMS FOR CHRIST MINISTRIES INC.

Current Principal Place of Business:

680 S SAVARY
INVERNESS, FL 34453

New Principal Place of Business:

Current Mailing Address:

680 S SAVARY
INVERNESS, FL 34453

New Mailing Address:

FEI Number: 04-3767620

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, JACKIE L
680 S SAVARY
INVERNESS, FL 34453 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: WILSON, JACKIE L
Address: 680 S SAVARY AVE
City-St-Zip: INVERNESS, FL 34453

Title: VD () Delete
Name: NEWBY, RICHARD
Address: 717 DESOTO AVE
City-St-Zip: INVERNESS, FL 34452

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: NEWBY, RICHARD
Address: 2359 LITTON RD
City-St-Zip: ONEIDA, TN 37841

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: JACKIE L. WILSON

D

01/24/2005

Electronic Signature of Signing Officer or Director

Date