

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000005198

**FILED**  
**Apr 25, 2004**  
**Secretary of State****Entity Name:** YAH HOUSE OF WINE/TINA CLEMENS MINISTRIES, INC.**Current Principal Place of Business:**2834 W RUTLAND DRIVE  
CITRUS SPRINGS, FL 34433**New Principal Place of Business:****Current Mailing Address:**2834 W RUTLAND DRIVE  
CITRUS SPRINGS, FL 34433**New Mailing Address:****FEI Number:** 20-1032282**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**DURHAM, HELENE  
2834 W RUTLAND DRIVE  
CITRUS SPRINGS, FL 34433 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:** DP ( ) Delete  
**Name:** CLEMENS, TINA  
**Address:** 2834 W RUTLAND DRIVE  
**City-St-Zip:** CITRUS SPRINGS, FL 34433**Title:** DV ( ) Delete  
**Name:** GILBERT, MARY LOU  
**Address:** 457 N ROOKS AVE  
**City-St-Zip:** INVERNESS, FL 34453**Title:** DS ( ) Delete  
**Name:** HARRIS, JILL  
**Address:** 3947 N.W. 95TH STREET  
**City-St-Zip:** OCALA, FL 34482**Title:** DT ( ) Delete  
**Name:** DURHAM, HELENE  
**Address:** 2834 W RUTLAND DRIVE  
**City-St-Zip:** CITRUS SPRINGS, FL 34433**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: HELENE DURHAM

DT

04/25/2004

Electronic Signature of Signing Officer or Director

Date