2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005287

Entity Name: GOD'S ELECT MINISTRIES, INC.

FILED May 03, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4733 W WATERS AVE APT 521 TAMPA, FL 33614

Current Mailing Address: New Mailing Address:

P.O.BOX 9702 TAMPA, FL 336749702

FEI Number: 20-1054425 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: Name and Address of New Registered Agent:

KIDD, VICKY L 4733 W WATERS AVE APT 521 TAMPA, FL 33614

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete

KIDD, VICKY L Name: Name: 4733 W WATERS AVE APT 521 Address: Address: City-St-Zip: TAMPA, FL 33614 City-St-Zip:

Title: VD () Delete Title: VSD (X) Change () Addition DAVIS, LORRAINE Name: DAVIS, LORRAINE Name:

Address: 8714 N 52ND ST Address: 8714 N 52ND ST City-St-Zip: TAMPA, FL 33617 City-St-Zip: TAMPA, FL 33617

Title: () Delete Title: (X) Change () Addition

SINGLETARY, TERESA SINGLETARY, TERESA Name: Name: 12708 N 19TH ST APT 1001 Address: Address: 12708 N 19TH ST APT 1001

City-St-Zip: TAMPA, FL 33612 City-St-Zip: TAMPA, FL 33612

(X) Change () Addition Title: () Delete Title: Name: UNDERWOOD, RUBY Name: COLEMAN, ALICIA 1526 N NUCCIO PARKWAY APT C Address: 2411 E 18TH ST Address:

City-St-Zip: TAMPA, FL 33605 City-St-Zip: TAMPA, FL 33605

Title: () Delete Title: (X) Change () Addition

MACK, XANDRETHA CONNER, TAMMY Name: Name:

12708 N 19TH ST APT 1001 4704 PURITAN ROAD APT A Address: Address: City-St-Zip: TAMPA, FL 33612 City-St-Zip: TAMPA, FL 33617

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: VICKY L KIDD PD 05/03/2005