

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007200

Entity Name: HUTCH STRAHM MINISTRIES, INC.

FILED
Aug 31, 2004
Secretary of State

Current Principal Place of Business:

12506 SHADOW RUN BLVD
RIVERVIEW, FL 33569

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 290657
TAMPA, FL 33687

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STRAHM, HUTCH
12506 SHADOW RUN BLVD
RIVERVIEW, FL 33569 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: T () Delete
Name: STRAHM, HUTCH
Address: 12506 SHADOW RUN BLVD
City-St-Zip: RIVERVIEW, FL 33569

Title: T () Delete
Name: STRAHM, JILL
Address: 12506 SHADOW RUN BLVD
City-St-Zip: RIVERVIEW, FL 33569

Title: T () Delete
Name: LANGEVELDT, HERBERT O
Address: 1891 HILLCREST DR
City-St-Zip: SHALLOTTE, NC 28462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: STRAHM, HUTCH
Address: 12506 SHADOW RUN BLVD
City-St-Zip: RIVERVIEW, FL 33569

Title: VP (X) Change () Addition
Name: STRAHM, JILL
Address: 12506 SHADOW RUN BLVD
City-St-Zip: RIVERVIEW, FL 33569

Title: SEC (X) Change () Addition
Name: LANGEVELDT, HERBERT O
Address: 1891 HILLCREST DR
City-St-Zip: SHALLOTTE, NC 28462

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: HUTCH STRAHM

PRES

08/31/2004

Electronic Signature of Signing Officer or Director

Date