

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007972

FILED
Apr 30, 2005
Secretary of State

Entity Name: POWER - LINE MEDIA MINISTRIES NETWORK CORP.

Current Principal Place of Business:

700 N. DIXIE HIGHWAY
HOLLYWOOD, FL 33020 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 835107
HOLLYWOOD, FL 33083 US

New Mailing Address:

FEI Number: 45-0523909 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, SAMUEL S
6636 ARBOR DR.
MIRAMAR, FL 33023 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: MILLER, SAMUEL S
Address: 700 N. DIXIE HIGHWAY
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: DT () Delete
Name: MARKS, ROSE
Address: 7240 TROPICANA ST.
City-St-Zip: MIRAMAR, FL 33023 US

Title: DS () Delete
Name: MILLER, ALICE
Address: 6636 ARBOR DRIVE
City-St-Zip: MIRAMAR, FL 33023 US

Title: D () Delete
Name: WALLACE, JULIET
Address: 3031 WINDWARD WAY
City-St-Zip: MIRAMAR, FL 33025 US

Title: D () Delete
Name: COVINGTON, BOBBY
Address: 2230 SW 67TH TER
City-St-Zip: MIRAMAR, FL 33023 US

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:

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: SAMUEL MILLER

Electronic Signature of Signing Officer or Director

DP

04/30/2005

Date