2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009512

Entity Name: TEKTON MINISTRIES INT'L, INC.

FILED May 02, 2006 Secretary of State

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

2113 ANCIENT OAK DRIVE 3400 BROMFIELD DRIVE ORLANDO, FL 34761 ORLANDO, FL 34761

Current Mailing Address: New Mailing Address:

P. O. BOX 690786 ORLANDO, FL 32869

FEI Number: 80-0082563 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:

HALL, ANYA M

2113 ANCIENT OAK DRIVE 3400 BROMFIELD DRIVE ORLANDO, FL 34761 US ORLANDO, FL 34761 US

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: ANYA M HALL 05/02/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: HALL, ANYA M Name: HALL, ANYA M Address: 2113 ANCIENT OAK DRIVE Address: 3400 BROMFIELD DRIVE

City-St-Zip: ORLANDO, FL 34761 Address: 3400 BROMFIELD DRIV

Title: D () Delete Title: () Change () Addition

 Name:
 JONES, RUNETTE C
 Name:

 Address:
 1602 NW 20TH AVENUE
 Address:

 City-St-Zip:
 OCALA, FL 34475
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 SMITH, LEONARD T
 Name:

 Address:
 6237 CARLEEN DRIVE
 Address:

 City-St-Zip:
 CRYSTAL RIVER, FL 34428
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 GILES, DEBRA T
 Name:

 Address:
 5200 TANGLEWOOD PINE LANE
 Address:

 City-St-Zip:
 RALIEGH, NC 27610
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ANYA M HALL D 05/02/2006