

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010181

FILED
Apr 07, 2005
Secretary of State

Entity Name: THE UNITED CHURCH OF THE REDEEMED AND MINISTRIES, INC.

Current Principal Place of Business:

16215 SE HAWTHORNE RD
HAWTHORNE, FL 32640

New Principal Place of Business:

Current Mailing Address:

16215 SE HAWTHORNE RD
HAWTHORNE, FL 32640

New Mailing Address:

5 RODGERS PLACE
PENSACOLA, FL 32506

FEI Number: 38-3693967

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GORHAM, SHELLY
16215 SE HAWTHORNE RD
HAWTHORNE, FL 32640 US

Name and Address of New Registered Agent:

GORHAM, SHELLY M
5 RODGERS PLACE
PENSACOLA, FL 32506 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: SHELLY M. GORHAM

04/07/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GORHAM, SHELLY
Address: 16215 SE HAWTHORNE RD
City-St-Zip: HAWTHORNE, FL 32640

Title: D () Delete
Name: PINKNEY, MARCUS
Address: 2924 NE 14TH DR
City-St-Zip: GAINESVILLE, FL 32609

Title: D () Delete
Name: GAY, WILLIE
Address: PO BOX 1346
City-St-Zip: HAWTHORNE, FL 32540

Title: D () Delete
Name: GORHAM, JAMES E
Address: 5 RODGERS PLACE
City-St-Zip: PENSACOLA, FL 32506

Title: D () Delete
Name: WASHINGTON, BOOKER T
Address: 1004 BENET CT
City-St-Zip: HUNTSVILLE, AL 35808

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GORHAM, SHELLY M
Address: 5 RODGERS PLACE
City-St-Zip: PENSACOLA, FL 32506

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: SHELLY M. GORHAM

D

04/07/2005

Electronic Signature of Signing Officer or Director

Date