2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001035

Entity Name: OUT OF THE FIRE MINISTRIES INC.

FILED Mar 20, 2006 Secretary of State

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

1438 NW 2ND AVE APT #2 622 ORCHARD BROOK ROAD FLORIDA CITY, FL 33034 GAINESVILLE, GA 30504

Current Mailing Address: New Mailing Address:

1438 NW 2ND AVE APT #2 P. O. BOX 343374 FLORIDA CITY, FL 33034 FLORIDA CITY, FL 33034

FEI Number: 14-1902627 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A.

1840 SW 22ND ST.

4TH FLOOR

MIAMI, FL 33145 US

AHRENS, FLORENCE

16900 SW 277 STREET

HOMESTEAD, FL 33031 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: FLORENCE AHRENS 03/20/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 PASSMORE, MIRIAM
 Name:
 PASSMORE, MIRIAM

 Address:
 1438 NW 2ND AVE APT #2
 Address:
 622 ORCHARD BROOK ROAD

 City-St-Zip:
 FLORIDA CITY, FL 33034
 City-St-Zip:
 GAINESVILLE, GA 30504

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

 Name:
 PIERCE, JULIANN
 Name:
 AHRENS, FLORENCE

 Address:
 8640 AMBERFIELD DRIVE
 Address:
 16900 SW 277 STREET

 City-St-Zip:
 GAINESVILLE, GA 30506
 City-St-Zip:
 HOMESTEAD, FL 33031

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

 Name:
 AHRENS, FLORENCE
 Name:
 STEVENSON, CHERYL A

 Address:
 16900 SW 277 ST
 Address:
 2151 N KROME AVE

 City-St-Zip:
 MIAMI, FL 33176
 City-St-Zip:
 HOMESTEAD, FL 33030

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

 Name:
 MERCER, JAMES
 Name:
 RUTLEDGE, KIMBERLY

 Address:
 27550 OLD DIXIE HWY
 Address:
 P. O. BOX 19294

 City-St-Zip:
 NARANJA, FL 33032
 City-St-Zip:
 BIRMINGHAM, AL 35219

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

 Name:
 MURPHY, DELORES
 Name:

 Address:
 15831 SW 284 ST
 Address:

 City-St-Zip:
 HOMESTEAD, FL 33033
 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: FLORENCE AHRENS VD 03/20/2006