## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 19, 2007 8:00 am Secretary of State

| DOCUMENT # N0400001044  1. Entity Name GOD'S ENDTIME PROPHETIC MINISTRIES, INC.  |   |   |  |  |  |           | <b>,</b>                      | 04-19-200°                        | •             |  |                               |
|--|---|---|--|--|--|-----------|-------------------------------|-----------------------------------|---------------|--|-------------------------------|
| Principal Place of Business  340 W AVE A  BELLE GLADE, FL 33430  Mailing Address P O BOX 885 BELLE GLADE, FL   |   |   |  |  |  |           |                               | <del>t</del> iin eila etki esin i |               |  |                               |
| 2. Principal Place of Business - No P.O. Box #   |   |   | 3. Mailing Address                                 |  |  |           |                               |                                   |               |  |                               |
| Suite, Apt. #, etc.  |   |   | Suite, Apt. #, etc.                                |  |  |           | 02142007                      | Chg-NP                            | CR2E          | 037 (12/06)  |                               |
| City & State   |   |   | City & State                                       |  |  |           | 4. FEI Numbe<br>83-0324       |                                   |               | J  | plied For<br>t Applicable     |
| Zip Country  |   | Zip Cox   |  | ntry   | 5. Certificate of Status Desired S8.75 Additional Fee Required   |           |                               |                                   |               |  |                               |
| 6. Name and Address of Current Registered Agent  |   |   |  |  |  |           | 7. Name and                   | Address of New                    | Registered    | Agent  |                               |
|  |   |   |  | İ  | Name   |           |                               |                                   |               |  |                               |
| TOMMIE, DEVONNA A<br>190 N. STATE RD. 715, LOT 253<br>BELLE GLADE, FL. 33430   |   |   |  | ļ  | Street Address (P.O. Box Number is Not Acceptable)   |           |                               |                                   |               |  |                               |
| BELLE GLADE, FL 33430  |   |   |  |  | City   |           |                               |                                   |               | Zip Code   |                               |
|  | 1. 4  |   |  | 1  | City   |           |                               |                                   | F             | L Zip Code   | <i>'</i>                      |
|  | named entitions of regis  |   | the purpose of changing its                        | registere  | d office or re   | egistere  | ed agent, or bot              | h, in the State of                | Florida. 1 an | n familiar with,   | and accept                    |
| SIGNATURE .  | $\infty$  | <del></del>   |  |  | mie  |           |                               | 2                                 | 2/18/         | 07   |                               |
|  | Signature, types  | d or printed name of registered agent a   | патан гаррисарие. (NUI                             | E: Registered  | Agent signature  | e rednaed | wieringusaung)                |                                   | UAIE          |  |                               |
|  |   |   |  |  |  |           |                               |                                   |               |  |                               |
|  |   | oe is \$61.25<br>May 1, 2007  | 9. Election Car<br>Trust Fund (                    |  |  | ]         | \$5.00 May B<br>Added to Fees | e FI                              |               | ck payable to<br>artment of St   |                               |
| 10.  |   | •   | Trust Fund (                                       |  |  | _J        | Added to Fees                 | e FI                              | orida Depa    | irtment of St  | ate                           |
| 10.<br>TITLE<br>NAME   | PD PD   | May 1, 2007   | Trust Fund (                                       | Contributi   | on.  | _J        | Added to Fees                 | FI                                | orida Depa    | irtment of St  | ate                           |
| TITLE<br>NAME<br>STREET ADDRESS  | PD TOMMIE, 190 N. ST  | OFFICERS AND DIR<br>DEVONNA A<br>TATE RD. 715, LOT 253  | Trust Fund (                                       | 11. TITLE NAME STREET  | on.  | _J        | Added to Fees                 | FI                                | orida Depa    | DIRECTORS IN   | ate<br>10                     |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE  | PD TOMMIE, 190 N. ST BELLE G  | OFFICERS AND DIR DEVONNA A TATE RD. 715, LOT 253 LADE, FL 33430   | Trust Fund (                                       | 11. TITLE NAME STREE CITY-   | ET ADDRESS<br>ST-ZIP   | _J        | Added to Fees                 | FI                                | orida Depa    | DIRECTORS IN   | ate<br>10                     |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS  | PD<br>TOMMIE,<br>190 N. ST<br>BELLE G<br>TD<br>TOMMIE,<br>190 N. ST         | OFFICERS AND DIR DEVONNA A TATE RD. 715, LOT 253 LADE, FL 33430  BRODERICK TATE RD. 715, LOT 253  | Trust Fund (  ECTORS  Delete                       | 11. TITLE NAME STREE CITY- TITLE NAME STREE STREE  | ET ADDRESS ST-ZIP  | _J        | Added to Fees                 | FI                                | orida Depa    | artment of St<br>DIRECTORS IN<br>Change  | 10 Addition                   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME   | PD<br>TOMMIE,<br>190 N. ST<br>BELLE G<br>TD<br>TOMMIE,<br>190 N. ST         | OFFICERS AND DIR DEVONNA A TATE RD. 715, LOT 253 LADE, FL 33430 BRODERICK   | Trust Fund (  ECTORS  Delete                       | 11. TITLE NAME STREE CITY- TITLE NAME STREE STREE  | et ADDRESS ST-ZIP Et ADDRESS ST-ZIP  | A         | Added to Fees                 | ANGES TO OFFIC                    | orida Depa    | artment of St<br>DIRECTORS IN<br>Change  | 10 Addition                   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME   | PD TOMMIE, 190 N. ST BELLE G TO TOMMIE, 190 N. ST BELLE G SD PETERS         | OFFICERS AND DIR DEVONNA A TATE RD. 715, LOT 253 LADE, FL 33430 BRODERICK TATE RD. 715, LOT 253 LADE, FL 33430 ON, CONSUELO                         | Trust Fund (  ECTORS  Delete  Delete               | 11. TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME  | ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP   | A         | Added to Fees                 | ANGES TO OFFIC                    | orida Depa    | Internet of St   | 10 Addition                   |
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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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.