

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002221

FILED
Apr 19, 2005
Secretary of State

Entity Name: FROM THE HEART OF GOD MINISTRIES, INC.

Current Principal Place of Business:

6250 EDGEWATER DR
ORLANDO, FL 32810

New Principal Place of Business:

1050 WEST MORSE BLVD.
ROOMS B & C
WINTER PARK, FL 32789 US

Current Mailing Address:

P O BOX 947647
MAITLAND, FL 32794

New Mailing Address:

P O BOX 947647
MAITLAND, FL 32794 US

FEI Number: 86-1099095

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SMITH, JOYCE
500 BANYON TREE CIR
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

SMITH, JOYCE D PASTOR
500 BANYON TREE CIR
APT 104
MAITLAND, FL 32751 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: JOYCE D. SMITH

04/19/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SMITH, JOYCE
Address: 500 BANYON TREE CIR
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: HOOPER, EDGAR
Address: 4632 PARMA CT
City-St-Zip: ORLANDO, FL 32811

Title: D () Delete
Name: BOUDOIN, JOYCE
Address: 1303 LUCKY PENNIE WAY
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SMITH, JOYCE D PASTOR
Address: 500 BANYON TREE CIR
City-St-Zip: MAITLAND, FL 32751

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: JOYCE D. SMITH

PAST

04/19/2005

Electronic Signature of Signing Officer or Director

Date