2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 06, 2006
Secretary of State

DOCUMENT# N04000002782

Entity Name: CHERITH MINISTRIES, INC.

Current Principal Place of Business:

2304 COBB DR.
TALLAHASSEE, FL 32312 US

New Principal Place of Business:

Current Mailing Address:

2304 COBB DR.
TALLAHASSEE, FL 32312 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:

HARTZ, DAVID L REV.
2304 COBB DR.
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: JONES, PAT I MRS
Address: 2239 10 OAKS DR
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: V ( ) Delete
Name: DAVID, FRITZ L MR.
Address: 1506 HIECHEE NENE
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: T ( ) Delete
Name: RENEA, BUATTI E MRS.
Address: 2141 HARRITE DR.
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: P ( ) Delete
Name: DAVID, HARTZ L REV.
Address: 2304 COBB DR.
City-St-Zip: TALLAHASSEE, FL 32312 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: DAVID L. HARTZ PRES 07/06/2006

Electronic Signature of Signing Officer or Director — Date