

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # N04000004158</b> 1. Entity Name <b>FIVE-FOLD MINISTRY FELLOWSHIP, INC.</b>			
Principal Place of Business <b>5674 LUMBER JACK LN TALLAHASSEE, FL 32303</b>		Mailing Address <b>5674 LUMBER JACK LN TALLAHASSEE, FL 32303</b>	
2. Principal Place of Business <b>2525 South Monroe ST.</b>		3. Mailing Address <b>2525 South Monroe ST.</b>	
Suite/Apt. #, etc. <b>18-B</b>		Suite/Apt. #, etc. <b>18-B</b>	
City & State <b>TALLAHASSEE, FLA.</b>		City & State <b>TALLAHASSEE</b>	
Zip <b>32301</b>		Zip <b>32303</b>	
Country <b>LEON</b>		Country <b>LEON</b>	
4. FEI Number <b>33-1098596</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>GAY, WANDA 132 HAVE A TAMPA DR HAVANA, FL 32333</b>		7. Name and Address of New Registered Agent Name <b>WILLIE D. WHITING JR.</b> Street Address (P.O. Box Number is Not Acceptable) <b>5674 LUMBER JACK LN.</b>  City <b>TALLAHASSEE</b>	
FL		Zip Code <b>32303</b>	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <u>Willie D. Whiting Jr.</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		DATE <u>4-27-05</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>	
<b>Filing Fee is \$61.25 Due by May 1, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	
<b>\$5.00 May Be Added to Fees</b>		<b>Make check payable to Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WHITING, WILLIE D JR 5674 LUMBER JACK LN TALLAHASSEE, FL 32303	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition  <b>700054204047</b> <b>05/10/05--01039--019 **61.25</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WHITAKER, VERNON 1191 W 23RD ST RIVIERA BEACH, FL 33404	<input checked="" type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition  <b>VP</b> <b>LINDA G. WHITING</b> <b>5674 LUMBER JACK LN.</b> <b>TALLAHASSEE, FLA. 32303</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FS WHITING, LINDA G 5674 LUMBER JACK LN TALLAHASSEE, FL 32303	<input checked="" type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PITTMAN, REDA F 1500 BAREBACK DR TALLAHASSEE, FL 32314	<input checked="" type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition  <b>SEC.</b> <b>CARRIE HORTON METZ</b> <b>728 DOVER ST.</b> <b>TALLAHASSEE, FLA.</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JOHNSON, ABE 4050 BOTHWELL TER TALLAHASSEE, FL 32317	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Willie D. Whiting Jr.</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>4-27-05</u> Daytime Phone # <u>(850) 562-3605</u>	

**FILED**

05 APR 27 PM 1:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

