

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004251

FILED
Apr 29, 2005
Secretary of State

Entity Name: MEN OF GOD, INC.

Current Principal Place of Business:

3158 NORTH PINE HILLS ROAD
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

3158 NORTH PINE HILLS ROAD
ORLANDO, FL 32808

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZZNDERS, BETTY B
215 GARDEN COVE COURT
ORLANDO, FL 32835 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: P () Delete
Name: JONES, DANIEL JR.
Address: 3158 NORTH PINE HILLS ROAD
City-St-Zip: ORLANDO, FL 32808

Title: V () Delete
Name: JONES, YOLANDA
Address: 3158 NORTH PINE HILLS ROAD
City-St-Zip: ORLANDO, FL 32808

Title: T () Delete
Name: JONES, DANIELLA
Address: 3158 NORTH PINE HILLS ROAD
City-St-Zip: ORLANDO, FL 32808

Title: S () Delete
Name: JONES, DIANA
Address: 3158 NORTH PINE HILLS ROAD
City-St-Zip: ORLANDO, FL 32808

Title: A () Delete
Name: ROBERTSON, CHARLES
Address: P O BOX 120581
City-St-Zip: CLERMONT, FL 34712

Title: A () Delete
Name: FRANKLIN, WILLIE GEAN
Address: 826 NORTH LEE AVENUE
City-St-Zip: ORLANDO, FL 32805

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:

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: DANIEL JONES

P

04/29/2005

Electronic Signature of Signing Officer or Director

Date