


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 14, 2006 08:00 AM
Secretary of State

DOCUMENT # N04000004259 1. Entity Name DIVINE FOCUSED MINISTRIES, INC.			
<table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> Principal Place of Business 7192 BLAIR DRIVE ORLANDO, FL 32818 </td> <td style="width: 50%; vertical-align: top;"> Mailing Address PO BOX 783361 WINTER GARDEN, FL 34778-3361 </td> </tr> </table>			Principal Place of Business 7192 BLAIR DRIVE ORLANDO, FL 32818
Principal Place of Business 7192 BLAIR DRIVE ORLANDO, FL 32818	Mailing Address PO BOX 783361 WINTER GARDEN, FL 34778-3361		
DO NOT WRITE IN THIS SPACE			
6. Name and Address of Current Registered Agent DOZIER, ALFONZA 328 WINDFORD CT WINTER GARDEN, FL 34787		DO NOT WRITE IN THIS SPACE	
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><i>Alfonza Dozier</i></u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		DATE <u>April 11, 2006</u>	
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE	P	DO NOT WRITE IN THIS SPACE	
NAME	DOZIER, RANDY		
STREET ADDRESS	7192 BLAIR DRIVE		
CITY-ST-ZIP	ORLANDO, FL 32818		
TITLE	V		
NAME	DOZIER, JENNETTE		
STREET ADDRESS	7192 BLAIR DRIVE		
CITY-ST-ZIP	ORLANDO, FL 32818		
TITLE	SEC		
NAME	DOZIER, CORA		
STREET ADDRESS	14944 COCHESTER STREET		
CITY-ST-ZIP	WINTER GARDEN, FL 34787		
TITLE	TREA	DO NOT WRITE IN THIS SPACE	
NAME	DOZIER, ALFONZO		
STREET ADDRESS	328 WINDFORD COURT		
CITY-ST-ZIP	WINTER GARDEN, FL 34787		
TITLE		DO NOT WRITE IN THIS SPACE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP		DO NOT WRITE IN THIS SPACE	
TITLE			
NAME			
STREET ADDRESS		DO NOT WRITE IN THIS SPACE	
CITY-ST-ZIP			
TITLE			
NAME		DO NOT WRITE IN THIS SPACE	
STREET ADDRESS			
CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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><i>Alfonza Dozier, Treasurer</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>April 11, 2006</u> Daytime Phone # <u>4078713483</u>	



04072006 No Chg-NP CR2E037 (11/05)

4. FEI Number 20-1111733	Applied For
	Not Applicable

5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

U00000508680
04/28/06-80014-011 70.00