

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004296

FILED
Aug 01, 2005
Secretary of State

Entity Name: CIRCLE OF SEVEN MINISTRIES, INC.

Current Principal Place of Business:

15906 HWY 301
DADE CITY, FL 33523

New Principal Place of Business:

Current Mailing Address:

PO BOX 2322
DADE CITY, FL 33526

New Mailing Address:

15906 HWY 301
DADE CITY, FL 33523

FEI Number: 59-3633707 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

O'NEAL, BETSY K REV.
18939 N HWY 301
DADE CITY, FL 33523 US

Name and Address of New Registered Agent:

HOLT, BETSY K REV. DR
15906 HWY 301
DADE CITY, FL 33523 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: REV. DR. BETSY K. HOLT

08/01/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Change (X) Addition
Name: HOLT, BETSY K REV.DR
Address: 15906 HWY 301
City-St-Zip: DADE CITY, FL 33523

Title: VP () Change (X) Addition
Name: HOLT, TERRENCE REV.
Address: 15904 HWY 301
City-St-Zip: DADE CITY, FL 33523

Title: D () Change (X) Addition
Name: REGISTER, PAUL E
Address: 16531 US HWY 301
City-St-Zip: DADE CITY, FL 33523

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: BETSY K. HOLT

REV

08/01/2005

Electronic Signature of Signing Officer or Director

Date