2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 15, 2006
Secretary of State

DOCUMENT# N04000005668

Entity Name: DOOR OF HOPE MINISTRIES, INC.

Current Principal Place of Business:

4818 ELKMONT RD.
ORLANDO, FL 32808 US

New Principal Place of Business:

1439 ADRIEL LANE
ORLANDO, FL 32812 US

Current Mailing Address:

P.O. BOX 550401
ORLANDO, FL 32855 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:

BRINSON, ERLENE A
4818 ELKMONT RD.
ORLANDO, FL 32808 US

Name and Address of New Registered Agent:

BRINSON, ERLENE A
1439 ADRIEL LANE
ORLANDO, FL 32812 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: _____ 08/15/2006
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BRINSON, ERLENE A
Address: 4818 ELKMONT RD.
City-St-Zip: ORLANDO, FL 32808 US

Title: S ( ) Delete
Name: JACKSON, BENITA L
Address: 333 E. HARRISON ST.
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: T ( ) Delete
Name: BRINSON, TIMOTHY L
Address: 6214 DENSON DR.
City-St-Zip: ORLANDO, FL 32808 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BRINSON, ERLENE A
Address: 1439 ADRIEL LANE
City-St-Zip: ORLANDO, FL 32812 US

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: ERLENE A. BRINSON P 08/15/2006
Electronic Signature of Signing Officer or Director — Date