2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2005
Secretary of State

DOCUMENT# N04000006321

Entity Name: FREEDOM SEMINARY OF THE TREASURE COAST, INC.

Current Principal Place of Business:

2225 SW IMPORT RD
FORT ST. LUCIE, FL 34953

New Principal Place of Business:

2225 SW IMPORT DRIVE
PORT ST. LUCIE, FL 34953

Current Mailing Address:

2225 SW IMPORT RD
FORT ST. LUCIE, FL 34953

New Mailing Address:

2225 SW IMPORT DRIVE
PORT ST. LUCIE, FL 34953

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROACH, ROBERT
2225 SW IMPORT RD
FORT ST. LUCIE, FL 34953 US

Name and Address of New Registered Agent:

ROACH, ROBERT
2225 SW IMPORT DRIVE
PORT ST. LUCIE, FL 34953 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: _____ 02/07/2005
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: TP ( ) Delete
Name: ROACH, ROBERT
Address: 2225 SW IMPORT RD
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: TVP ( ) Delete
Name: VARELLA, FRANK DR.
Address: 319 OLIVE AVE
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: TST ( ) Delete
Name: MCMAHON, BRIAN
Address: 5 MELODY HILL
City-St-Zip: STUART, FL 34996

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TP (X) Change ( ) Addition
Name: ROACH, ROBERT
Address: 2225 SW IMPORT DRIVE
City-St-Zip: PORT ST. LUCIE, FL 34953

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: ROBERT W. ROACH PRES 02/07/2005
Electronic Signature of Signing Officer or Director — Date