2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400006384

FILED Jan 10, 2005 Secretary of State

Entity Name: THE FOOD MINISTRY OF WEST CENTRAL FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

2155 PAUL BUCHMAN HWY. 6315 S. RIVERGLEN CRYSTAL SPRINGS, FL 33524 OZARK, MO 65721 US

Current Mailing Address: New Mailing Address:

P.O. BOX 520 6315 S. RIVERGLEN CRYSTAL SPRINGS, FL 33524 US OZARK, MO 65721 US

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STRICKLAND, JOHN 403 EUCLID AVE SEFFNER, FL 33584

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

CEO (X) Change () Addition () Delete STRICKLAND, JOHN HOULIHAN, ROBERT DR. Name: Name: 403 EUCLID AVE Address: 6315 S. RIVERGLEN RD. Address: City-St-Zip: SEFFNER, FL 33584 US City-St-Zip: **OZARK, MO 65721 US**

Title: ED Title: MR. (X) Change () Addition () Delete Name:

JARVIS, DICK Name: BURDINE, DAVID Address: 37919 NICK AVE Address: 14960 PRISTINE DR

City-St-Zip: ZEPHYRHILLS, FL 33542 US City-St-Zip: COLORADO SPRINGS, CO 80921 US

Title: () Delete Title: DR. (X) Change () Addition JARVIS, MARGE Name: KIM, NAM S DR. Name:

130-30 31ST AVE. Address: 37919 NICK AVE Address: City-St-Zip: ZEPHYRHILLS, FL 33542 US City-St-Zip: FLUSHING, NY 11354 US

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 HOULIHAN CEO 01/10/2005