2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2006
Secretary of State

DOCUMENT# N04000006572

Entity Name: END TIME MESSAGE MINISTRIES, INC.

Current Principal Place of Business:

1016 BEE POND ROAD
PALM HARBOR, FL 34683

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 1046
PALM HARBOR, FL 34682

New Mailing Address:

FEI Number: 55-0873601 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DARLING, EDITH M
1016 BEE POND ROAD
PALM HARBOR, FL 34683 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	PF	( ) Delete
Name:	DARLING, EDITH M	
Address:	1016 BEE POND ROAD	
City-St-Zip:	PALM HARBOR, FL 34683	
Title:	VP	( ) Delete
Name:	DARLING, BRUCE R	
Address:	1016 BEE POND ROAD	
City-St-Zip:	PALM HARBOR, FL 34683	
Title:	S	( ) Delete
Name:	FORTUNE, LESLIE	
Address:	3349 36TH STREET NORTH	
City-St-Zip:	ST. PETERSBURG, FL 33713	
Title:	T	( ) Delete
Name:	MURPHY, KIMBERLY	
Address:	1208 MOONDALE COURT	
City-St-Zip:	VALRICO, FL 33594	
Title:	A TR	( ) Delete
Name:	COX, KIMBERLY	
Address:	1980 BRIARWOOD STREET	
City-St-Zip:	DUNEDIN, FL 34698	
Title:	M C	(X) Delete
Name:	BLAKE, ERICKA	
Address:	1321 OLD VILLAGE WAY	
City-St-Zip:	OLDSMAR, FL 34677	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: EDITH M. DARLING PF 01/21/2006

Electronic Signature of Signing Officer or Director — Date