## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0400006684

FILED Jun 02, 2005 Secretary of State

Entity Name: FOLLOW ME INTERNATIONAL MINISTRIES, INC.

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

4734 FALLING ACORN CIRCLE 600 RINEHART RD LAKE MARY, FL 32746 LAKE MARY, FL 32746

Current Mailing Address: New Mailing Address:

P.O. BOX 953323 P.O. BOX 953323

LAKE MARY, FL 32795-33 23 LAKE MARY, FL 32795-332

FEI Number: 20-1448554 FEI Number Applied For ( ) FEI Number Not Applicable ( ) 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: Name and Address of New Registered Agent:

RAMOS, ROBERTO
4734 FALLING ACORN CIRCLE
LAKE MARY, FL 32746 US

NOGUERAS, ROBERTO
5012 OLDE KERRY DR.
ORLANDO, FL 32746 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: ROBERTO NOGUERAS 06/02/2005

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

e: PDCM ( ) Delete Title: PDCM (X) Change ( ) Addition

Name: MONTERO, DANILO Name: MONTERO, DANILO Address: 4734 FALLING ACORN CIRCLE Address: 2053 COURTYARD LOOP 14-103.

City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: SANFORD, FL 32771

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 RAMOS, ROBERTO
 Name:
 NOGUERAS, ROBERTO

 Address:
 P.O. BOX 953323
 Address:
 5012 OLDE KERRY DR.

 City-St-Zip:
 LAKE MARY, FL 32795
 City-St-Zip:
 ORLANDO, FL 32837

Title: MSTD ( ) Delete Title: ( ) Change ( ) Addition

Name:MATOS, REYName:Address:RAMONITA STREET 329 BELLAS LOMASAddress:City-St-Zip:MAYAGUEZ, PR 00680City-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: DANILO MONTERO PDCM 06/02/2005