## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000007163

Entity Name: ART OLSON MINISTRY FUND, INC.

FILED Aug 05, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
11555 HERON BAY BLVD - STE 200 CORAL SPRINGS, FL 33076	210 N. UNIVERSITY DRIVE, SUITE 707 CORAL SPRINGS, FL 33071
Current Mailing Address:	New Mailing Address:
11555 HERON BAY BLVD - STE 200 CORAL SPRINGS, FL 33076	210 N. UNIVERSITY DRIVE, SUITE 707 CORAL SPRINGS, FL 33071
FEI Number: 20-1372307 FEI Number Applied For ( In accordance with s. 607.193(2)(b), F.S., the corporation	

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

LAUDADIO, JOHN A

11555 HERON BAY BLVD - STE 200

CORAL SPRINGS, FL 33076 US

LAUDADIO, JOHN A

210 N. UNIVERSITY

CORAL SPRINGS, F

210 N. UNIVERSITY DRIVE, SUITE 707 CORAL SPRINGS, FL 33071 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: JOHN LAUDADIO 08/05/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition
Name: OLSON, LAUREN Name:
Address: 1875 EAGLE TRACE BLVD EAST Address:
City-St-Zip: CORAL SPRINGS, FL 33071 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition Name: BROWN, LINDA Name:

 Name:
 BROWN, LINDA
 Name:

 Address:
 1875 EAGLE TRACE BLVD EAST
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL 33071
 City-St-Zip:

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$ 

Name: LAUDADIO, JOHN Name: LAUDADIO, JOHN

Address: 11555 HERON BAY BLVD - STE 200 Address: 210 N UNIVERSITY DRIVE, SUITE 707 City-St-Zip: CORAL SPRINGS, FL 33076 City-St-Zip: CORAL SPRINGS, FL 33071

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: JOHN LAUDADIO D 08/05/2005