

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007216

FILED
Feb 25, 2005
Secretary of State

Entity Name: PISHON MINISTRIES INTERNATIONAL, INC.

Current Principal Place of Business:

5200 WIGGINS LAKE RD
WALNUT HILL, FL 32568

New Principal Place of Business:

Current Mailing Address:

5200 WIGGINS LAKE RD
WALNUT HILL, FL 32568

New Mailing Address:

P.O. BOX 13183
PENSACOLA, FL 32591

FEI Number: 43-2057567

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINSLOW, THOMAS C
5200 WIGGINS LAKE RD
WALNUT HILL, FL 32568 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: DP () Delete
Name: WINSLOW, THOMAS S
Address: 5200 WIGGINS LAKE RD
City-St-Zip: WALNUT HILL, FL 32568

Title: DS () Delete
Name: WINSLOW, BARBARA J
Address: 5200 WIGGINS LAKE RD
City-St-Zip: WALNUT HILL, FL 32568

Title: D () Delete
Name: LIVINGSTON, DAN
Address: 340 BOBWHITE DR
City-St-Zip: PENSACOLA, FL 32514

Title: D () Delete
Name: WETZEL, PAUL PASTOR
Address: 1650 SUNNY RIDGE LAND
City-St-Zip: CANTONMENT, FL 32537

Title: DT () Delete
Name: WEAVER, WESLEY J
Address: 609 DUNDEE DRIVE
City-St-Zip: PENSACOLA, FL 32507

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: LIVINGSTON, DAN PASTOR
Address: 340 BOBWHITE DR
City-St-Zip: PENSACOLA, FL 32514

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: WESLEY J WEAVER

TD

02/25/2005

Electronic Signature of Signing Officer or Director

Date