2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE AND TYPED OR PRINTED NAME OF MY

Secretary of State DOCUMENT # N04000007321 04-15-2005 90077 022 ****61.25 THE STRAIGHT WAY OF GRACE MINISTRY, INC. Principal Place of Business Mailing Address 312 W MIAMI AVE 312 W MIAMI AVE PALICORE VENICE, FL 34285 VENICE, FL 34285 2. Principal Place of Business 3. Mailing Address Suite, Apt. #. etc Suite Ant # etc. 03122005 Chg-NP CR2E037 (10/03) 4. FEI Number City & State City & State Applied For 65-1231182 Not Applicable Zip Country Zρ Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DAKDOK, USAMA 312 W MIAMI AVE Street Address (P.O. Box Number is Not Acceptable) VENICE, FL 34285 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signsture required when remetating) DATE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2005 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PD Delete ☐ Change Addition DAKDOK , VICKY 312 W_MIAMI AVE DAKDOK, USAMA NAME NAME STREET ADDRESS 312 W MIAMI AVE STREET ADDRESS CITY-ST-ZIP VENICE, FL 34285 CITY-ST-ZIP 34982 VENILE, FL TILE ☐ Delete TITLE Addition ☐ Change NAME NAME ALBERT, blow C \$13 civily ST STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-ST-7IP Addition Delete TITLE ☐ Change PARNETT WILLIAM H 841 WARRYSIDE #102 1/2016, FL -34285-NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-7IP CITY-ST-ZIP. TITLE Addition ☐ Delete TITLE Change NAME NAME STREET ADDRESS HARBOR DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP TITLE ☐ Delete TITLE ☐ Change Addition MR WOOD, JAMES NAME NAME STREET ADDRESS STREET ADDRESS 1430 DONA WAY CITY-ST-ZP CITY-ST-7P MOKOMIS TITLE Delete TITLE Addition MALAE NAME STREET ADDRESS STREET ADDRESS 809 RIVIERA 12. I hereby certify that the information supplied with this filling does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. WILLIAM BARNETT

FILED

Apr 15, 2005 8:00 am

2005 NOT-FOR-PROFIT CORPORATION ATTACHMENT ANNUAL REPORT OFFICERS/DIRECTORS/ TRUSTEES Continued 40057729 DOCUMENT # N04000007321 THE STRAIGHT WAY OF GRACE-MINISTRY, INC. Principal Place of Business Mailing Address 312 W MIAMI AVE 312 W MIAMI AVE VENICE, FL 34285 VENICE, FL 34285 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03122005 Cho-NP CR2E037 (10/03) City & State 4.65-1231182 City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DAKDOK, USAMA Street Address (P.O. Box Number is Not Acceptable) 312 W MIAMI AVE VENICE, FL 34285 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered appearand title if explicable (NOTE: Requitered Agent expettion required when constature) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be П Trust Fund Contribution. Due by May 1, 2005 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE PD ☐ Delete TITLE Addition DACH , RANDY DAKDOK, USAMA NAME NAME 1317 HERMITAGE BUD Venicy, FL 34292 STREET ADDRESS 312 W MIAMI AVE STREET ADDRESS CITY-ST-ZIP VENICE, FL 34285 CITY-ST-ZIP TITLE TITLE P Addition ☐ Delete MARSHALL, DAVID NAME NAME PO BOX 1413 SORIMUNIA STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP MOKOMIU, FL Addition TITLE ☐ Detete TITLE EESE, GAR NAME MARKE STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP Delete TITLE TITLE ■ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-ST-7IP ☐ Change ☐ Addition TITLE Delete TITLE NAME STREET ADDRESS STREET ADORESS 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other life empowered.