2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State
05-01-2006 90410 012 ****70.00

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1. Entity Name
POTTERS HOUSE WORSHIP MINISTRIES, INC.

Principal Place of Business	Mailing Address
5214 LABRADOR LANE ORLANDO, FL 32818	5214 LABRADOR LANE ORLANDO, FL 32818

02052006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
9600 W COLONIAL DRIVE	857 GULF LAND DRIVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: OCOEE, FLORIDA	City & State: APOPKA, FLORIDA
Zip: 34761 Country:	Zip: 32712 Country:

4. FEI Number: 55-0871685 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
REID, EDWARD B PASTOR 5214 LABRADOR LANE ORLANDO, FL 32818	Name: SAME AS #6 Street Address (P.O. Box Number is Not Acceptable): 857 GULF LAND DRIVE City: APOPKA FL Zip Code: 32712

6. 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 agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP REID, EDWARD B PASTOR 5214 LABRADOR LANE ORLANDO, FL 32818	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 857 GULF LAND DRIVE APOPKA, FLORIDA 32712
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP REID, JOSEPHINE W PASTOR 5214 LABRADOR LANE ORLANDO, FL 32818	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 857 GULF LAND DRIVE APOPKA, FLORIDA 32712
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D REID, TASHIA D DR. 5214 LABRADOR LANE ORLANDO, FL 32818	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 5229 VINELAND ROAD ORLANDO, FLORIDA 32811
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: Edward B Reid 4-28-06 407 506 2578
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #