

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009421

FILED
Jan 11, 2005
Secretary of State

Entity Name: RAAH FINANCIAL MINISTRIES, INC.

Current Principal Place of Business:

8018 MOSSY CREEK
PENSACOLA, FL 325268419

New Principal Place of Business:

Current Mailing Address:

8018 MOSSY CREEK
PENSACOLA, FL 325268419

New Mailing Address:

FEI Number: 26-0095616

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, RON B
8018 MOSSY CREEK
PENSACOLA, FL 325268419 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: PD () Delete
Name: JONES, RON B
Address: 8018 MOSSY CREEK
City-St-Zip: PENSACOLA, FL 325268419

Title: SD () Delete
Name: JONES, ANGIE J
Address: 8018 MOSSY CREEK
City-St-Zip: PENSACOLA, FL 325268419

Title: TD () Delete
Name: WORRELL, RANDY K
Address: 5650 WEST SHORE DR.
City-St-Zip: PENSACOLA, FL 32526

Title: VD () Delete
Name: LOWE, JERRY W
Address: 3749 LINWOOD RD.
City-St-Zip: GASTONIA, NC 28052

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: RON B. JONES

PD

01/11/2005

Electronic Signature of Signing Officer or Director

Date