

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011163

FILED  
Apr 19, 2006  
Secretary of State

Entity Name: REDEEMED MINISTRIES, INC.

## Current Principal Place of Business:

2122 SEWARD DR.  
SARASOTA, FL 34234

## New Principal Place of Business:

## Current Mailing Address:

2122 SEWARD DR.  
SARASOTA, FL 34234

## New Mailing Address:

FEI Number: 02-0734203

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WIGGS, RICKY  
2122 SEWARD DR.  
SARASOTA, FL 34234 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: D ( ) Delete  
Name: WILSON, MILTON  
Address: 9212 N. 28TH ST.  
City-St-Zip: TAMPA, FL 33612

Title: D ( ) Delete  
Name: DAVIS, VIOLET  
Address: 1313 WAIKIKI WAY  
City-St-Zip: TAMPA, FL 33619

Title: D ( ) Delete  
Name: OWENS, MARY  
Address: P.O. BOX 3102  
City-St-Zip: SARASOTA, FL 34230

Title: D ( ) Delete  
Name: REDDING, RICHARD  
Address: 2653 22ND ST.  
City-St-Zip: SARASOTA, FL 34234

Title: D ( ) Delete  
Name: HARVEY, TREVOR  
Address: 2752 21ST ST.  
City-St-Zip: SARASOTA, FL 34234

Title: D ( ) Delete  
Name: OLIVER, EDWINA  
Address: 1716 TARPON AVE.  
City-St-Zip: SARASOTA, FL 34234

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: WIGGS, CARLA  
Address: 2122 SEWARD DR  
City-St-Zip: SARASOTA, FL 34234

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:

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 Chapter 119, 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: CARLA WIGGS

D

04/19/2006

Electronic Signature of Signing Officer or Director

Date