

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007983

FILED  
May 13, 2006  
Secretary of State

**Entity Name:** DIVINE MINISTRY OF NORTH FLORIDA, INC.

**Current Principal Place of Business:**

3924 NW 38TH PLACE  
GAINESVILLE, FL 32606

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 5668  
GAINESVILLE, FL 32627

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

A1A REGISTERED AGENT INC.  
92 SADBERRY RD  
QUINCY, FL 32351 US

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: DCEO ( ) Delete  
Name: EDWARDS, ANNTWANIQUE  
Address: 3924 NW 38TH PLACE  
City-St-Zip: GAINESVILLE, FL 32606

Title: D ( ) Delete  
Name: SAVAGE, LORENZO II  
Address: 1910 SW 42ND WAY APT E  
City-St-Zip: GAINESVILLE, FL 32607

Title: D ( ) Delete  
Name: DURANT, MICHELLE  
Address: 1708 NE 15TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32609

Title: DS ( ) Delete  
Name: JACKSON, JENNIFER  
Address: 930 NE 23RD AVE APT B  
City-St-Zip: GAINESVILLE, FL 32609

Title: D ( ) Delete  
Name: WILLIAMS, IANA  
Address: 2250 NE 12TH AVE  
City-St-Zip: GAINESVILLE, FL 32641

**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:

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: ANNTWANIQUE EDWARDS

DCEO

05/13/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date