2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006871

Apr 24, 2008 Secretary of State

FILED

Entity Name: INMATES OF THE CROSS MINISTRIES INC.

Current Principal Place of Business: New Principal Place of Business:

3225 AVALON RD. 1717 CURRY AVE.. WINTER GARDEN, FL 34787 ORLANDO, FL 32812

Current Mailing Address: New Mailing Address:

3225 AVALON RD. 1717 CURRY AVE.. WINTER GARDEN, FL 34787 ORLANDO, FL 32812

FEI Number: 20-5043466 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

REID, DENNIS E

3225 AVALON RD.

WINTER GARDEN, FL 34787 US

REID, DENNIS E

1717 CURRY AVE.

ORLANDO, FL 32812 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: 04/24/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 REID, DENNIS
 Name:
 REID, DENNIS

 Address:
 3225 AVALON RD.
 Address:
 1717 CURRY AVE.

 City-St-Zip:
 WINTER GARDEN, FL 34787
 City-St-Zip:
 ORLANDO, FL 32812

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 REID, JOAN S
 Name:
 REID, JOAN S

 Address:
 3225 AVALON RD.
 Address:
 1717 CURRY AVE.

 City-St-Zip:
 WINTER GARDEN, FL 34787
 City-St-Zip:
 ORLANDO, FL 32812

Title: D () Delete Title: () Change () Addition

 Name:
 JACKS, RICHARD
 Name:

 Address:
 3223 EVERETT ST.
 Address:

 City-St-Zip:
 APOPKA, FL 32703
 City-St-Zip:

Title: AD () Delete Title: () Change () Addition

 Name:
 JACKS, MARY ELIZABETH
 Name:

 Address:
 3223 EVERETT ST.
 Address:

 City-St-Zip:
 APOPKA, FL 32703
 City-St-Zip:

Title: TD () Delete Title: () Change () Addition

 Name:
 RODRIGUEZ, OCTAVIO
 Name:

 Address:
 7302 VICTORIA CIRCLE
 Address:

 City-St-Zip:
 ORLANDO, FL 32835
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DENNIS REID PD 04/24/2008