2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 27, 2007
Secretary of State

DOCUMENT# N06000008810

Entity Name: BODY OF ONE MINISTRIES, INC.

Current Principal Place of Business:

2040 AMBERGRIS DR
ORLANDO, FL 32822

New Principal Place of Business:

Current Mailing Address:

2040 AMBERGRIS DR
ORLANDO, FL 32822

New Mailing Address:

FEI Number: 20-5890811 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

TROLLINGER, SARA E
2036 36TH ST
ORLANDO, FL 32839 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: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES ( ) Change (X) Addition
Name: REYNOSO, FRANK MR.
Address: 2040 AMBERGRIS DRIVE
City-St-Zip: ORLANDO, FL 32822

Title: VP ( ) Change (X) Addition
Name: LUCARINI, CARRIE
Address: 2092 AMBERGRIS DRIVE
City-St-Zip: ORLANDO, FL 32822

Title: SEC ( ) Change (X) Addition
Name: FYOCK, BRYAN
Address: 8116 BROCATEL CT.
City-St-Zip: ORLANDO, FL 32822

Title: TREA ( ) Change (X) Addition
Name: REYNOSO, AGNES
Address: 2040 AMBERGRIS DRIVE
City-St-Zip: ORLANDO, FL 32822

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: FRANK REYNOSO PRES 08/27/2007

Electronic Signature of Signing Officer or Director — Date