

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07402

FILED  
Apr 27, 2005  
Secretary of State

Entity Name: DAYBREAK MINISTRIES, INC.

## Current Principal Place of Business:

1040 BAYVIEW DR., STE. 317  
FT. LAUDERDALE, FL 33304

## New Principal Place of Business:

## Current Mailing Address:

1040 BAYVIEW DR., STE. 317  
FT. LAUDERDALE, FL 33304

## New Mailing Address:

FEI Number: 59-2595536

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JONES, KEITH  
1040 BAYVIEW DR  
SUITE 317  
FT. LAUDERDALE, FL 33304 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: CDP ( ) Delete  
Name: SOLOMON, STEPHEN ALA, N  
Address: 3900 NE 18 AVENUE #24  
City-St-Zip: FT. LAUDERDALE, FL

Title: V ( ) Delete  
Name: JONES, KEITH,  
Address: 4025 N FEDERAL HWY #311-O  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: S ( ) Delete  
Name: WARD, BETTIE  
Address: 2115 NE 37 DRIVE  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: T ( ) Delete  
Name: SOLOMON, DAWN  
Address: 3900 NE 18 AVE #24  
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: D ( ) Delete  
Name: LETIZE, JIM REV  
Address: 3311 NW 9 AVE  
City-St-Zip: POMPANO BEACH, FL 33064

Title: D ( ) Delete  
Name: DINAN, TOM  
Address: 1001 SE 6TH AVE APT B-207  
City-St-Zip: DEERFIELD BEACH, FL 334416976

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change ( ) Addition  
Name: WOOD, BETTIE  
Address: 2115 NE 37 DRIVE  
City-St-Zip: FORT LAUDERDALE, FL 33308

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: KEITH JONES

V

04/27/2005

Electronic Signature of Signing Officer or Director

Date