2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16887

FILED Apr 27, 2006 Secretary of State

Entity Name: WORTHY CREATIONS MINISTRY, INC.

Current Principal Place of Business: New Principal Place of Business: 5554 N. FEDERAL HIGHWAY, 4TH FL 5554 N. FEDERAL HIGHWAY, 3RD FL FT LAUDERDALE, FL 33308 FT LAUDERDALE, FL 33308 **Current Mailing Address: New Mailing Address:** 5554 N. FEDERAL HIGHWAY, 4TH FL 5554 N. FEDERAL HIGHWAY, 3RD FL FT LAUDERDALE, FL 33308 US FT LAUDERDALE, FL 33308 FEI Number: 59-2734562 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SIEGENTHALER, RON 5554 N FEDERAL HWY FORT LAUDERDALE, FL 33308 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SIEGENTHALER, RON Name: Name: 5554 N FEDERAL HWY Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: Title: () Delete Title: () Change () Addition SNEERINGER, CHRISTINE Name: Name: Address: 5554 N FEDERAL HWY Address: City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: Title: () Delete Title: () Change () Addition STEEGE, DAVID Name: Name: 9510 WOODLAND RIDGE Address: Address: City-St-Zip: TAMPA, FL 33637 City-St-Zip: Title: () Delete Title: () Change () Addition Name: HARREN, JULIE Name: Address: 810 8TH WAY Address: City-St-Zip: WEST PALM BEACH, FL 33407 City-St-Zip: Title: () Delete Title: (X) Change () Addition DESTEFANO, GENNARINO GAGE, WARREN Name: Name: 2401 W CYPRESS CREEK RD 5554 N FEDERAL HWY Address: Address: FORT LAUDERDALE, FL 33308 City-St-Zip: FORT LAUDERDALE, FL 33309 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: CHRISTINE SNEERINGER DIR 04/27/2006