

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 20, 2005 8:00 am**  
**Secretary of State**

04-20-2005 90333 046 \*\*\*\*61.25

**DOCUMENT # N17213**

1. Entity Name

**FISHERS OF MEN MINISTRIES INTERNATIONAL, INC.**



Principal Place of Business

3270 SUNTREE BLVD  
218  
MELBOURNE FL 32940  
US

Mailing Address

POST OFFICE BOX 410953  
MELBOURNE FL 32941-0953

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-2743310**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THREADGILL, EDGAR JAMES III  
561 YOUNG ST  
MELBOURNE FL 32936**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Edgar James Threadgill III*

*President / Director*

*4/13/05*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	THREADGILL, EDGAR J., III	
STREET ADDRESS	561 YOUNG ST	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE	ST	<input type="checkbox"/> Delete
NAME	THREADGILL, LINDA	
STREET ADDRESS	561 YOUNG STREET	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE	D	<input type="checkbox"/> Delete
NAME	MITCHELL, EDDIE	
STREET ADDRESS	1615 WEST BELT LINE RD	
CITY-ST-ZIP	CARROLTON TX 75006	
TITLE	VD	<input type="checkbox"/> Delete
NAME	THREADGILL, EDGAR J., JR.	
STREET ADDRESS	218-A E EAU GALLIE BLVD #1	
CITY-ST-ZIP	INDIAN HARBOR BCH FL 32937	
TITLE	D	<input type="checkbox"/> Delete
NAME	FRANKLIN, TIM	
STREET ADDRESS	710 SPRING LAKE DR.	
CITY-ST-ZIP	MELBOURNE FL 32940	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MAHER, JIM	
STREET ADDRESS	4103 E. 107TH ST.	
CITY-ST-ZIP	KANSAS CITY MO 64137	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Dr. Lawrence Kennedy	
STREET ADDRESS	1615 West Belt Line Rd.	
CITY-ST-ZIP	Carrollton, TX 75006	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Dr. Mike Maiden	
STREET ADDRESS	11640 N. 19th Ave	
CITY-ST-ZIP	Phoenix, AZ 85029	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Edgar James Threadgill III*

*Edgar J. Threadgill*

*4/13/05*

*(321) 752-6766*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #