## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N19690

FILED Jun 04, 2004 Secretary of State

Entity Name: IMPACT INTERNATIONAL MINISTRIES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 3832 W BROWARD BLVD 3830 W BROWARD BLVD PLANTATION, FL 33312 PLANTATION, FL 33312 US US **Current Mailing Address: New Mailing Address:** 3832 W BROWARD BLVD 3830 W BROWARD BLVD PLANTATION, FL 33312 US PLANTATION, FL 33312 US FEI Number: 65-0003084 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: KEELS, ELGIE KEELS, ELGIE 3832 W BROWARD BLVD 3830 W BROWARD BLVD PLANTATION, FL 33312 US PLANTATION, FL 33312 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: ELGIE KEELS 06/04/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition KEELS, ELGIE, Name: Name: Address: 7400 NW 54TH COURT Address: City-St-Zip: LAUDERHILL, FL 33319 City-St-Zip: Title: Title: ( ) Delete () Change () Addition Name: KEELS, LORIE, Name: Address: 7400 NW 54TH COURT Address: City-St-Zip: LAUDERHILL, FL 33319 City-St-Zip: Title: (X) Delete Title: () Change () Addition JONES, JOHN E Name: Name: 4562 NW 17TH WAY Address: Address: City-St-Zip: TAMARAC, FL 33309 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: THOMAS, BERNARD Name: Address: 3390 NW 7TH STREET Address: City-St-Zip: FT LAUDERDALE, FL 33311 City-St-Zip: Title: Title: () Delete () Change () Addition WHEELER, GUY A Name: Name: 5340 SW 9TH STREET Address: Address: City-St-Zip: PLANTATION, FL 33317 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: ELGIE KEELS P 06/04/2004