


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2005 8:00 am
Secretary of State

03-29-2005 90010 031 ****70.00

DOCUMENT # N29092					
1. Entity Name LIVELY STONES FOR JESUS MINISTRIES, INC.					
Principal Place of Business 835 NW 119 ST NORTH MIAMI, FL 33168 US			Mailing Address 835 NW 119 ST NORTH MIAMI, FL 33168 US		
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 NOT APPLICABLE	
				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>			5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
KNOWLES, THELMA 1700 NW 67TH AVE #414 MIAMI, FL 33015			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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	VD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KNOWLES, BURLEY		NAME		
STREET ADDRESS	1560 S.W. 87 TERR.		STREET ADDRESS		
CITY-ST-ZIP	PIMBROKE PINES, FL 33025		CITY-ST-ZIP		
TITLE	TD	<input checked="" type="checkbox"/> Delete	TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JACKSON, BRIAN		NAME	Berlisa Knowles	
STREET ADDRESS	8090 S.W. 24TH PL.		STREET ADDRESS	17000 NW 67th Ave #414	
CITY-ST-ZIP	MIRIMAR, FL 33025		CITY-ST-ZIP	Miami Lakes, FL 33015	
TITLE	SD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WHATLEY, MAE		NAME		
STREET ADDRESS	4350 N.W. 187TH ST		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33055		CITY-ST-ZIP		
TITLE	MD	<input checked="" type="checkbox"/> Delete	TITLE	MD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BUTLER, CYNTHIA		NAME	Brian Knowles	
STREET ADDRESS	1622 N.W. 65TH ST.		STREET ADDRESS	12957 SW 24th street	
CITY-ST-ZIP	MIAMI, FL 33147		CITY-ST-ZIP	Miramar, FL 33027	
TITLE	P	<input type="checkbox"/> Delete	TITLE	DD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KNOWLES, THELMA B		NAME	Nasha Knowles	
STREET ADDRESS	17000 NW 67TH AVE.		STREET ADDRESS	12957 SW 24th street	
CITY-ST-ZIP	MIAMI LAKES, FL 33015		CITY-ST-ZIP	Miramar, FL 33027	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: <u>Thelma B. Knowles</u> <u>Thelma B. Knowles</u> 05-05 (305) 362-3991					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date</small>					
<small>Daytime Phone #</small>					