


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 16, 2006 8:00 am
Secretary of State

05-16-2006 90020 003 ****70.00

DOCUMENT # N29092 1. Entity Name LIVELY STONES FOR JESUS MINISTRIES, INC.	
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Principal Place of Business 835 NW 119 ST NORTH MIAMI, FL 33168 US	Mailing Address 835 NW 119 ST NORTH MIAMI, FL 33168 US
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05032006 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KNOWLES, THELMA
 1700 NW 67TH AVE
 #414
 MIAMI, FL 33015

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KNOWLES, BURLEY 1560 S.W. 87 TERR. PIMBROKE PINES, FL 33025
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KNOWLES, BERLISA 17000 NW 67TH AVE, # 414 MIAMI LAKES, FL 33015
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WHATLEY, MAE 4350 N.W. 187TH ST MIAMI, FL 33055
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MD KNOWLES, BRIAN 12957 SW 24TH STREET MIRAMAR, FL 33027
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KNOWLES, THELMA B 17000 NW 67TH AVE. MIAMI LAKES, FL 33015
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD KNOWLES, NASHA 12957 SW 24TH STREET MIRAMAR, FL 33027

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Thelma B. Knowles 05-05-06 (305) 362-3991
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #