

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31687

FILED
Feb 10, 2004
Secretary of State**Entity Name:** SKILLS APPLIED FOR EVANGELISM, INC.**Current Principal Place of Business:**1216 GOLFVIEW DR.
%VIRGINIA L. DUGAN (PO BX 4107, SD 32121
DAYTONA BEACH, FL 32114**New Principal Place of Business:****Current Mailing Address:**PO BOX 214107
%VIRGINIA L. DUGAN (PO BX 4107, SD 32121
SOUTH DAYTONA, 32121 VO**New Mailing Address:**PO BOX 214107
%VIRGINIA L. DUGAN (PO BX 4107, SD 32121
SOUTH DAYTONA, FL 32121 VO**FEI Number:** 59-2951557**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DUGAN, VIRGINIA L.
1216 GOLFVIEW DR.
DAYTONA BEACH, FL 32114**Name and Address of New Registered Agent:**

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:Title: D () Delete
Name: PRINSTON, JEROME
Address: 1216 GOLFVIEW DR
City-St-Zip: DAYTONA BEACH, FLTitle: PD () Delete
Name: JONES, CHARLES R.,
Address: 466 CHARLOTTA AVE SE
City-St-Zip: PALM BAY, FL 32909Title: SD () Delete
Name: JONES, PATRICIA,
Address: 466 CHALOTTA AVE SE
City-St-Zip: PALM BAY, FL 32909Title: D () Delete
Name: ORLOSKY, DONALD,
Address: 813 PARK TRAIL DR
City-St-Zip: CLERMONT, FL 34711Title: ED () Delete
Name: DUGAN, DONALD V
Address: 1216 GOLFVIEW DR
City-St-Zip: DAYTONA BEACH, FL 32114**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
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: DONALD V DUGAN

ED

02/10/2004

Electronic Signature of Signing Officer or Director

Date