2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34498

Jul 07, 2005 Secretary of State

Entity Name: KIDZ BLITZ MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business:

301 UNITED CT., SUITE 4 LEXINGTON, NY 40509 301 UNITED CT. SUITE 4

LEXINGTON, KY 40509

Current Mailing Address: New Mailing Address:

301 UNITED CT., SUITE 4 LEXINGTON, NY 40509 301 UNITED CT.

SUITE 4

LEXINGTON, KY 40509

FEI Number: 59-2966480 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DOVEY, KENNETH A 1329 RYAN LANE

W. PALM BEACH, FL 33411 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete FIELDS, ROGER FIELDS, ROGER T Name: Name: Address: 1004 WOODSHIRE WAY Address: 1004 WOODSHIRE WAY City-St-Zip: LEXINGTON, KY 40515 City-St-Zip: LEXINGTON, KY 40515

(X) Change () Addition Title: () Delete Title:

Name: FIELDS, TAMARA Name: FIELDS, TAMARA J Address: 1004 WOODSHIRE WAY Address: 1004 WOODSHIRE WAY City-St-Zip: LEXINGTON, KY 40515 City-St-Zip: LEXINGTON, KY 40515

Title: () Delete Title: (X) Change () Addition

HARRISON, TERRA HARRISON, TERRA D Name: Name: 105 GREENTREE DRIVE 105 GREENTREE DRIVE Address: Address: City-St-Zip: NICHOLASVILLE, KY 40356 City-St-Zip: NICHOLASVILLE, KY 40356

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: TERRA D HARRISON ST 07/07/2005