2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36619

FILED Jan 24, 2005 Secretary of State

Entity Name: CHURCH ON THE WAY INC. **Current Principal Place of Business: New Principal Place of Business:** 1320 N.W. 188 TERRACE 655 N.W. 125TH STREET MIAMI, FL 33169 MIAMI, FL 33168 **Current Mailing Address: New Mailing Address:** P.O. BOX 694482 MIAMI, FL 33269 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CUFFY, PASTOR GILBERT CUFFY, GILBERT REV. 1485 NW 193RD TER 1485 NW 193RD TER MIAMI, FL 33169 MIAMI, FL 33169 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: GILBERT CUFFY 01/24/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CUFFY, GILBERT, Name: Name: Address: 1485 NW 193RD TER Address: City-St-Zip: MIAMI, FL City-St-Zip: Title: () Delete Title: () Change () Addition JOSEPH, PATRICIA Name: Name: Address: 1330 NW 82ND ST Address: City-St-Zip: MIAMI, FL 33147 City-St-Zip: Title: () Delete Title: () Change () Addition NICHOLSON, PEARL Name: Name: 15600 N.W. 7TH AVE. #217 Address: Address: City-St-Zip: MIAMI, FL 33162 City-St-Zip: Title: () Delete Title: () Change () Addition HESKEITH, BANNIS Name: Name: Address: 6425 ROYAL PALM BLVD Address: City-St-Zip: POMPANO BEACH, FL 33063 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: GILBERT CUFFY REV. 01/24/2005