


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar. 22, 2004 08:00 AM
Secretary of State

DOCUMENT # N38023 1. Entity Name GOD IS LOVE MINISTRY, INC.	
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Principal Place of Business 2209 W. REYNOLDS ST. PLANT CITY, FL 33566	Mailing Address 609 S. SHORT ST. PLANT CITY, FL 33566 S
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03172004 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0212734	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

DAVIS, ERNESTINE
609 SHORT ST
PLANT CITY, FL 33566

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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 Ernestine Davis DATE 3/17/04
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000093663 03/22/04-80027-005 61.25
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DAVIS, JOHN SR 609 SHORT ST PLANT CITY, FL 33566
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DAVIS, DARRYL 609 SHORT ST PLANT CITY, FL 33566
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, CATHYE 609 SHORT ST PLANT CITY, FL 33566
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DAVIS, ERNESTINE 609 SHORT ST PLANT CITY, FL 33566
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GLOVER, PATRICIA 609 SHORT ST PLANT CITY, FL 33566
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS DAVIS, BRENDA 609 SHORT ST PLANT CITY, FL 33566

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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: Bishop John Davis Bishop JOHN DAVIS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #