

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38205

FILED
May 10, 2005
Secretary of State

Entity Name: FULNESS MINISTRIES INTERNATIONAL, INC.

Current Principal Place of Business:

957 SW 71 AVENUE
NORTH LAUDERDALE, FL 33068 US

New Principal Place of Business:

Current Mailing Address:

957 SW 71 AVENUE
NORTH LAUDERDALE, FL 33068 US

New Mailing Address:

FEI Number: 65-0200121 **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:

BROOKINS, JIMMY L.
957 SW 71 AVENUE
NORTH LAUDERDALE, FL 33068 US

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: PD () Delete
Name: BROOKINS, JIMMY L.,
Address: 957 SW 71 AVENUE
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: D () Delete
Name: WERNER, JERRY B.,
Address: 3561 NW 99 AVE.
City-St-Zip: CORAL SPRINGS, FL

Title: VTD () Delete
Name: SITTON, ROBERT
Address: 105 NW 104 TERRACE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: S () Delete
Name: GREENFIELD, NIKKI
Address: 3516 CORAL SPRINGS DR.
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D () Delete
Name: PAGAN, ORLANDO
Address: 12114 NW 27 DR.
City-St-Zip: CORAL SPRINGS, FL 33065

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: NIKKI GREENFIELD

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05/10/2005

Electronic Signature of Signing Officer or Director

Date