2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39529

Entity Name: CAPERNAUM MINISTRIES, INC.

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

C/O WAY, JAMES 110 PARK AVE. E. STE. B.

INDIAN LAKE ESTATES, FL 33855 US

New Mailing Address: Current Mailing Address:

C/O WAY, JAMES P.O. BOX 7275

INDIAN LAKE ESTATES, FL 338557275 US

FEI Number: 59-3011848 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WAY, JAMES PO BOX 7275

INDIAN LAKE ESTATES, FL 338557275 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:

Date

Name:

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

(X) Change () Addition

WAY, JAMES S

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete BALL, ROGER Name: 455 SW 58TH AVE Address:

Address: 323 HIBISCUS DR VERO BEACH, FL 32968 City-St-Zip:

City-St-Zip: INDIAN LAKE ESTATES, FL 33855 US

Title: TD () Delete Title: (X) Change () Addition BELL, DWIGHT W Name: BELL, DWIGHT W Name:

Address: 361 SW MAJESTIC TERRACE Address: 361 SW MAJESTIC TERRACE City-St-Zip: PORT ST LUCIE, FL 34984 City-St-Zip: PORT ST LUCIE, FL 34984 US

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

WAY, JAMES SHIPMAN, FREDERICK Name: Name: Address: 323 HIBISCUS Address: 365 JOG ROAD

City-St-Zip: INDIAN LAKE ESTATES, FL 33855 City-St-Zip: WEST PALM BEACH, FL 33415 US

() Delete Title: VΡ Title: D (X) Change () Addition WILLIS, RAY BALL, ROGER Name: Name:

455 SW 58TH AVE Address: 890 N HWY 19 Address: City-St-Zip: PALATKA, FL 32178 City-St-Zip: VERO BEACH, FL 32968 US

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

MCCANTS, RON MILLER, TROY Name: Name: 7 W MAIN STREET, STE 300 Address: Address: 5688 E. SR 44

City-St-Zip: APOPKA, FL 32703 City-St-Zip: WILDWOOD, FL 34785 US

Title: () Delete Title: (X) Change () Addition SMITH, CLIFTON SMITH, CLIFTON Name: Name:

Address: 7 W MAIN STREET, STE 300 Address: 7 W MAIN STREET, STE 300 APOPKA, FL 32703 APOPKA, FL 32703 US City-St-Zip: 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: JIM WAY Ρ 04/20/2005

Apr 20, 2005

Secretary of State