

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2006
Secretary of State

DOCUMENT# N43119

Entity Name: SPIRIT OF THE LORD MINISTRIES, INC.

Current Principal Place of Business:

1933 WILLIAMS MANOR AVE
P.O. BOX 3741
ORLANDO, FL 32802

New Principal Place of Business:

Current Mailing Address:

1933 WILLIAMS MANOR AVE
P.O. BOX 3741
ORLANDO, FL 32802

New Mailing Address:

FEI Number: 59-3066327 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONWAY, L.J. (LAMAR)
1933 WILLIAMS MANOR AVE.
ORLANDO, FL 32811 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: CONWAY, L.J. (LAMAR)
Address: 1933 WILLIAMS MANOR AVE
City-St-Zip: ORLANDO, FL 32802 US

Title: VD () Delete
Name: HALL, CAROLYN R
Address: 4318 COLONY WAY
City-St-Zip: ORLANDO, FL 32808 US

Title: TD () Delete
Name: FORD, PAMELA D
Address: 15694 BUCK LANE
City-St-Zip: DUMFRIES, VA 22026 US

Title: ST () Delete
Name: STEPHENS, ELLEN G
Address: 1964 LAKE FOUNTAIN DR. APT 218
City-St-Zip: ORLANDO, FL 32839 US

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: L. J. (LAMAR) CONWAY

PD

04/14/2006

Electronic Signature of Signing Officer or Director

_____ Date