2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44001

FILED Apr 29, 2005 Secretary of State

Entity Name: TRUE FOUNDATION MINISTRIES, INC.

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

608 RANDOLPH STREET CRESCENT CITY, FL 32112 US

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 781 CRESCENT CITY, FL 32112 US

FEI Number: 59-3129205 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:

GEORGE, GWENDOLYN FISHER GEORGE, GWENDOLYN FISHER 500 WEST AIRPORT BOULEVARD 206 YALE DRIVE SANFORD, FL 32771 US APT. 1705

SANFORD, FL 32773 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: 04/29/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

GEORGE, GWENDOLYN F GEORGE, GWENDOLYN F Name: Name:

206 YALE DRIVE Address: 500 WEST AIRPORT BOULEVARD, APT. 1705 Address:

City-St-Zip: SANFORD, FL City-St-Zip: SANFORD, FL 32773 US

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

GEORGE, RAYMOND J Name: GEORGE, RAYMOND J Name: Address: 206 YALE DRIVE Address:

500 WEST AIRPORT BOULEVARD, APT, 1705 SANFORD, FL 32773 US

City-St-Zip: SANFORD, FL 32771 City-St-Zip:

Title: SD () Delete Title: SD (X) Change () Addition HARRIS, ALMA HARRIS, ALMA Name: Name:

1018 FULLWOOD AV 1018 FULLWOOD AV Address: Address:

City-St-Zip: CRESCENT CITY, FL 32112 City-St-Zip: CRESCENT CITY, FL 32112 US

() Delete Title: MD Title: MD (X) Change () Addition SCOTT, TERI Name: SCOTT, TERI Name:

Address: 117 LEAH DR Address: 117 LEAH DR

City-St-Zip: CLAYTON, NC 27520 City-St-Zip: CLAYTON, NC 27520 US

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

SCOTT, RICHARD J SCOTT, RICHARD J Name: Name: 117 LEAH DR Address: 117 LEAH DR Address:

CLAYTON, NC 27520 US City-St-Zip: CLAYTON, NC 27520 City-St-Zip:

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

MURPHY, MILTON Name: Name: Address: Address: 644 GLENHAVEN AVENUE PIERSON, FL 32180 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: GWENDOLYN FISHER GEORGE Ρ 04/29/2005

Electronic Signature of Signing Officer or Director

Date