2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45150

FILED Feb 22, 2005 Secretary of State

Entity Name: TRUE VINE CHRISTIAN CENTER, INC. **Current Principal Place of Business: New Principal Place of Business:** 5945 W. HALLANDALE BEACH BLVD WEST HOLLYWOOD, FL 33023 **Current Mailing Address: New Mailing Address:** 5945 W. HALLANDALE BEACH BLVD WEST HOLLYWOOD, FL 33023 FEI Number: 65-0638570 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: DANIELS, ELDER HENRY L 5945 W. HALLANDALE BCH. US W. HOLLYWOOD, FL 33023 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete DANIELS, HENRY L., Name: Name: Address: 5945 W. HALLANDALE BCH. BLVD. Address: City-St-Zip: W. HOLLYWOOD, FL 33023 City-St-Zip: Title: () Delete Title: () Change () Addition Name: DANIELS, LYDIA, Name: Address: 5945 W. HALLANDALE BCH. BLVD. Address: City-St-Zip: W. HOLLYWOOD, FL 33023 City-St-Zip: Title: () Delete Title: () Change () Addition MALLORY, RICHARD, Name: Name: 4721 N.W. 16TH ST. Address: Address: City-St-Zip: LAUDERHILL, FL 33313 City-St-Zip: Title: () Delete Title: () Change () Addition Name: PICKETT, SABRINA D Name: Address: 5945 W. HALLANDALE BCH. BLVD. Address: City-St-Zip: W. HOLLYWOOD, FL 33023 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: DANIELS, ELDER HENRY L. PD 02/22/2005