2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2006
Secretary of State

DOCUMENT# N46550

Entity Name: MIKE COYLE MINISTRIES, INC.

Current Principal Place of Business:

10809 SE 51AT AVENUE
BELLEVIEW, FL 34420 US

New Principal Place of Business:

Current Mailing Address:

10809 SE 51AT AVENUE
BELLEVIEW, FL 34420 US

New Mailing Address:

P. O. BOX 3700
BELLEVIEW, FL 34421 US

FEI Number: 23-7426353 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COYLE, MICHAEL E.
8951 S.E. 120TH PLACE
BELLEVIEW, FL 34420 US

Name and Address of New Registered Agent:

COYLE, MICHAEL E.
10809 S. E. 51ST AVE
BELLEVIEW, FL 34420 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: _____ 01/10/2006
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: COYLE, MICHAEL E.,
Address: 8951 S.E. 120TH PLACE
City-St-Zip: BELLEVIEW, FL

Title: D ( ) Delete
Name: COYLE, JOANNE K.,
Address: 8951 S.E. 120TH PLACE
City-St-Zip: BELLEVIEW, FL

Title: D ( ) Delete
Name: COYLE, TODD M.,
Address: 2309 SYCAMORE WAY
City-St-Zip: PINE MOUNTAINS CLUB, CA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: COYLE, MICHAEL E.,
Address: 10809 S. E. 51ST AVE.
City-St-Zip: BELLEVIEW, FL 34420 US

Title: D (X) Change ( ) Addition
Name: COYLE, JOANNE K.,
Address: 10809 S. E. 51ST AVE.
City-St-Zip: BELLEVIEW, FL

Title: D (X) Change ( ) Addition
Name: COYLE, TODD M.,
Address: 2309 SYCAMORE WAY
City-St-Zip: PINE MOUNTAINS CLUB, CA 93222 US

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: MICHAEL E. COYLE, PRESIDENT D 01/10/2006
Electronic Signature of Signing Officer or Director — Date