

**2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Aug 17, 2005  
Secretary of State**

DOCUMENT# N47729

Entity Name: SOUL SAVING STATION DISCIPLESHIP MINISTRIES, INC.

**Current Principal Place of Business:**

1600 N.W. 176TH TERRACE  
MIAMI, FL 33169

**New Principal Place of Business:**

**Current Mailing Address:**

1600 N.W. 176TH TERRACE  
MIAMI, FL 33169

**New Mailing Address:**

FEI Number: 65-0315842      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PORTER, BARBARA J SD  
1600 N.W. 176TH TERRACE  
MIAMI, FL 33169      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: PORTER, MIKEAL B  
Address: 1600 N.W. 176TH TERR  
City-St-Zip: MIAMI, FL

Title: VD ( ) Delete  
Name: WOODARD, WILLIE M  
Address: 1181 ATLANTIC AVENUE  
City-St-Zip: OPA LOCKA, FL 33054

Title: SD ( ) Delete  
Name: PORTER, BARBARA J  
Address: 1600 N.W. 176TH TERR  
City-St-Zip: MIAMI, FL

Title: TD ( ) Delete  
Name: OUTLER, VERSIE  
Address: 2281 S SHERMAN CIRCLE APT B311  
City-St-Zip: MIRAMAR, FL 33025

**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: TD (X) Change ( ) Addition  
Name: PORTER, BARBARA J  
Address: 1600 NW 176 TERR.  
City-St-Zip: MIAMI GARDEN, FL 33169 US

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: MIKEAL B.PORTER

PD

08/17/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date