

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48112

FILED
Jan 06, 2006
Secretary of State

Entity Name: ENRIGHT FLIGHT MINISTRIES, INC.

Current Principal Place of Business:

1919 JACKSON LANE
PORT ORANGE, FL 32128 US

New Principal Place of Business:

Current Mailing Address:

1326 S RIDGEWOOD AVE
STE 21
DAYTONA BEACH, FL 32114 US

New Mailing Address:

FEI Number: 59-3150545 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEDGERWOOD, EILEEN
1919 JACKSON LANE
DAYTONA BEACH, FL 32118 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: D () Delete
Name: ENRIGHT, KENNETH,
Address: 1919 JACKSON LANE
City-St-Zip: PORT ORANGE, FL 32128

Title: D () Delete
Name: LEDGERWOOD, EILEEN,
Address: 1919 JACKSON LANE
City-St-Zip: DAYTONA BEACH, FL

Title: D () Delete
Name: ENRIGHT, LORRAINE,
Address: 1919 JACKSON LANE
City-St-Zip: PORT ORANGE, FL 32128

Title: D () Delete
Name: LEDGERWOOD, JOHN,
Address: 1919 JACKSON LANE
City-St-Zip: DAYTONA BEACH, FL

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: EILEEN LEDGERWOOD

D

01/06/2006

Electronic Signature of Signing Officer or Director

_____ Date