

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 10, 2006
Secretary of State**

DOCUMENT# N48446

Entity Name: JOHN BEVERE MINISTRIES, INC.

Current Principal Place of Business:

610 S. SANTA FE RIDGE DRIVE
PALMER LAKE, CO 80133 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 888
PALMER LAKE, CO 80133

New Mailing Address:

FEI Number: 59-3123555 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, LORAN A
2381 SW ISLAND CREEK TRAIL
PALM CITY, FL 34990 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: BEVERE, JOHN P JR
Address: 610 S SANTA FE RIDGE DRIVE
City-St-Zip: PALMER LAKE, CO 80133 US

Title: VST () Delete
Name: BEVERE, LISA T
Address: 610 S SANTA FE RIDGE DRIVE
City-St-Zip: PALMER LAKE, CO 80133 US

Title: D () Delete
Name: BRICE, JAMES A
Address: 420 DUNN ROAD
City-St-Zip: FAYETTEVILLE, NC 28301 US

Title: SD () Delete
Name: JOHNSON, LORAN A
Address: 2381 SW ISLAND CREEK TRAIL
City-St-Zip: PALM CITY, FL 34990 US

Title: D () Delete
Name: LARSON, GARY
Address: 610 S SANTA FE RIDGE DRIVE
City-St-Zip: PALMER LAKE, CO 80133 US

Title: () Delete
Name:
Address:
City-St-Zip:

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CFO () Change (X) Addition
Name: RAMSAY, AARON S CPA
Address: 610 S SANTA FE RIDGE DRIVE
City-St-Zip: PALMER LAKE, CO 80133 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: AARON S RAMSAY

CFO

04/10/2006

Electronic Signature of Signing Officer or Director

Date