2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50731

Entity Name: KEN SUMRALL MINISTRIES, INC.

FILED May 24, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4901 FOREST CREEK DRIVE 4900 FOREST CREEK DRIVE PACE, FL 32571 US PACE, FL 32571

Current Mailing Address: New Mailing Address:

4901 FOREST DREEK DRIVE 4900 FOREST DREEK DRIVE PACE, FL 32571 US PACE, FL 32571

FEI Number: 59-3100531 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SUMRALL, KENNETH I. SUMRALL, KENNETH I. 4901 FORÉST CREEK DRIVE 4900 FORÉST CREEK DRIVE PACE, FL 32571 PACE, FL 32571

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: 05/24/2004

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete SUMRALL, KENNETH I., SUMRALL, KENNETH I., Name: Name: 4901 FOREST CREEK DRIVE Address: 4900 FOREST CREEK DRIVE Address:

PACE, FL PACE, FL

City-St-Zip: City-St-Zip:

Title: () Delete Title: (X) Change () Addition Name: SUMRALL, WANDA R., Name: SUMRALL, WANDA R.

Address: 4901 FOREST CREEK DRIVE Address: 4900 FOREST CREEK DRIVE

City-St-Zip: PACE, FL City-St-Zip: PACE, FL

Title: VD. () Delete Title: (X) Change () Addition

SIMPSON, CHARLES V., Name: SIMPSON, CHARLES V., Name: Address: POBOXZ Address: PO BOX 850067 City-St-Zip: MOBILE, AL 36616 US City-St-Zip: MOBILE, AL 36685 US

Title: STD () Delete Title: () Change () Addition

WEAVER, WESLEY J., Name: Name: Address: 609 DUNDEE DR Address: City-St-Zip: PENSACOLA, FL 32507 US 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: KENNETH I SUMRALL PD 05/24/2004