

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000465

FILED  
May 20, 2004  
Secretary of State

**Entity Name:** JESUS IS ALIVE OUTREACH MINISTRIES, GRACE AND GLORY CHURCH, INTERNATIONAL  
INCORPORATED

**Current Principal Place of Business:**

2065 NW 15TH PLACE  
DELRAY BEACH, FL 33445 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 8343  
DELRAY BEACH, FL 33482

**New Mailing Address:**

**FEI Number:** 65-0337052

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PRICE, DR DJ  
2065 NW 15TH PLACE  
DELRAY BEACH, FL 33445 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: PRICE, DAVID J  
Address: 2065 NW 15TH PLACE  
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: D ( ) Delete  
Name: PRICE, AMY I  
Address: 2065 NW 15TH PLACE  
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: D ( ) Delete  
Name: PRICE, KATHLEEN R  
Address: 2065 NW 15TH PLACE  
City-St-Zip: DELRAY BEACH, FL 33445 US

**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:

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: DAVID J PRICE

D

05/20/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date