

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000648

FILED  
Apr 26, 2004  
Secretary of State

Entity Name: GOSPEL TEMPLE CHURCH MINISTRIES INC.

**Current Principal Place of Business:**

4601 N 22 ST  
TAMPA, FL 33610

**New Principal Place of Business:**

**Current Mailing Address:**

4601 N 22 ST  
TAMPA, FL 33610

**New Mailing Address:**

FEI Number: 06-1692874

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BROWN, WILLIE L  
7018 N CENTER DR  
TAMPA, FL 33604 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: P ( ) Delete  
Name: BROWN, WILLIE L  
Address: 7018 N CENTER DR  
City-St-Zip: TAMPA, FL 33604

Title: TR ( ) Delete  
Name: ROBINSON, MICHELLE  
Address: 107 N PALMER ST  
City-St-Zip: PLANT CITY, FL 33566

Title: VT ( ) Delete  
Name: BROWN, CONNIE L  
Address: 7018 N CENTER DR  
City-St-Zip: TAMPA, FL 33604

Title: T ( ) Delete  
Name: WILLIAMS, JAMES  
Address: 6102 WEBB RD  
City-St-Zip: TAMPA, FL 33615

**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 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: WILLIE BROWN

P

04/26/2004

Electronic Signature of Signing Officer or Director

Date