2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004243

Current Principal Place of Business:

Entity Name: CARING MINISTRIES FELLOWSHIP, INC.

FILED May 02, 2006 Secretary of State

| 2423 E. MALL DR. FORT MYERS, FL 33901 | US | 2674 WINKLER AVE 424 FORT MYERS, FL 33901 | US |
|--|--|--|-----------------------------------|
| Current Mailing Address: | | New Mailing Address: | |
| 2423 E MALL DR FORT MYERS, FL 33901 | US | 2674 WINKLER AVE 424 FORT MYERS, FL 33901 | US |
| | El Number Applied For() FEI Nu (b), F.S., the corporation did not receive | | Certificate of Status Desired (X) |
| Name and Address of Curi | rent Registered Agent: | Name and Address of Ne | w Registered Agent: |
| WILLIAMS, ROBERT E PRE 2427 E MALL DRIVE #429 FORT MYERS EL 33901 L | | WILLIAMS, ROBERT E PR 2674 WINKLER AVE #424 FORT MYERS EL 33901 | |

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.

Title:

SIGNATURE: ROBERT E WILLIAMS 05/02/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

New Principal Place of Business:

(X) Change () Addition () Delete HOWE, FRANCES HOWE, FRANCES Name: Name: Address: 2674 WINKLER AVE. APT. 409 Address: 301 VILLAGE DRIVE City-St-Zip: FORT MYERS, FL 33901 US City-St-Zip: MASON, OH 45040 US Title: () Delete Title: (X) Change () Addition Name: WILLIAMS, BETTY J Name: WILLIAMS, BETTY J Address: 2427 E MALL DR Address: 2674 WINKLER AVE #424 City-St-Zip: FORT MYERS, FL 33901 US City-St-Zip: FORT MYERS, FL 33901 US Title: () Delete Title: (X) Change () Addition HUEBNER, HARLD F Name: HUEBNER, HAROLD F Name: 2150 GRACE AVE Address: Address: 528 E HIGH ST City-St-Zip: FT MYERS, FL 46750 US City-St-Zip: HUNTINGTON, IN 46750 US Title: () Delete Title: () Change () Addition Name: HAZEN, ROBERT Name: Address: 4618 51 Address: City-St-Zip: CAMROS, AL T4V1T3 CA City-St-Zip: () Delete Title: Title: (X) Change () Addition WHITEHAIR, PATRICIA WHITEHAIR, PATRICIA Name: Name: 4944 CLEVELAND #D43 P O BOX 544 Address: Address: FT MYERS, FL 33907 US ELLWOOD, PA 16117 US City-St-Zip: City-St-Zip:

HOUSER, SHIRLEY S Name: Name: Address: 432 MILPORT ST NW Address:

PORT CHARLOTTE, FL 33948 CH City-St-Zip: City-St-Zip:

() Delete

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.

Title:

SIGNATURE: ROBERT E WILLIAMS **PRES** 05/02/2006