

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005573

FILED  
May 24, 2005  
Secretary of State

**Entity Name:** RELEASED MINISTRIES INC, INTERNATIONAL

**Current Principal Place of Business:**

6250 EDGEWATER DR  
300/400  
ORLANDO, FL 32810 US

**New Principal Place of Business:**

**Current Mailing Address:**

5164 CONROY ROAD  
#1523  
ORLANDO, FL 32811 US

**New Mailing Address:**

6250 EDGEWATER DRIVE  
300/400  
ORLANDO, FL 32810 US

**FEI Number:** 59-3206901 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

HAYWARD, RITA E  
5164 CONROY ROAD #1523  
ORLANDO, FL 32811 US

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

HAYWARD, RITA E  
3611 DARTFORD DRIVE  
DAVENPORT, FL 33837 US

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: RITA E HAYWARD

05/24/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: STD ( ) Delete  
Name: HAYWARD, RITA E  
Address: 2413 MYRNA STREET  
City-St-Zip: ORLANDO, FL 32839

Title: D ( ) Delete  
Name: BROWN, ROSIE  
Address: 4806 BALBOA DR.  
City-St-Zip: ORLANDO, FL 32808

Title: D ( ) Delete  
Name: MILLNER, SIBIL  
Address: 1115 DENTON RD  
City-St-Zip: WINTER PARK, FL 32792

Title: D ( ) Delete  
Name: MILLNER, VANESSA  
Address: 1115 DENTON RD  
City-St-Zip: WINTER PARK, FL 32792

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: STD (X) Change ( ) Addition  
Name: HAYWARD, RITA E  
Address: 3611 DARTFORD DRIVE  
City-St-Zip: DAVENPORT, FL 33837

Title: D (X) Change ( ) Addition  
Name: BROWN, ROSIE  
Address: 2311 KINGSLAND AVE  
City-St-Zip: ORLANDO, FL 32808

Title: D (X) Change ( ) Addition  
Name: MILLNER, SYBIL  
Address: 4864 LAKERIDGE RD  
City-St-Zip: ORLANDO, FL 32810

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: RITA E HAYWARD

STD

05/24/2005

Electronic Signature of Signing Officer or Director

Date