2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2004
Secretary of State

DOCUMENT# N94000003540

Entity Name: I AM THAT I AM CHURCH, INC.

Current Principal Place of Business:

20 PERSHING PL
ORLANDO, FL 32805 US

New Principal Place of Business:

Current Mailing Address:

20 PERSHING PLACE
ORLANDO, FL 32805 US

New Mailing Address:

FEI Number: 59-3299766 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FITZGERALD, CHARLES
20 PERSHING PLACE
ORLANDO, FL 32805 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: FITZGERALD, CHARLES
Address: 20 PERSHING PLACE
City-St-Zip: ORLANDO, FL

Title: D ( ) Delete
Name: FITZGERALD, HANNAH
Address: 20 PERSHING PLACE
City-St-Zip: ORLANDO, FL

Title: D ( ) Delete
Name: LOVETT, MARY LOUISE
Address: 4182 BOOKER STREET
City-St-Zip: ORLANDO, FL

Title: D ( ) Delete
Name: LOVETT, FERNELL
Address: 4182 BOOKER STREET
City-St-Zip: ORLANDO, FL

Title: D ( ) Delete
Name: EADY, DEBRA
Address: 4182 BOOKER STREET
City-St-Zip: ORLANDO, FL

Title: D ( ) Delete
Name: WRATH, KATHERINE
Address: 1617 W. CENTRAL BLVD., #607
City-St-Zip: ORLANDO, FL

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:

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: CHARLES FITZGERALD D 01/09/2004

Electronic Signature of Signing Officer or Director — Date