## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000004074

FILED Feb 25, 2005 Secretary of State

Entity Nam	ne: CENTRAL	PENTECOSTAL MINISTRIES, INC.		,
Current Pri	incipal Place c	f Business:	New Princi	ipal Place of Business:
2731 S HW LYNN HAVI	Y 77 EN, FL 32444	US		
Current Ma	ailing Address	:	New Mailir	ng Address:
PO BOX 15 LYNN HAVI	58 EN, FL 32444	US		
FEI Number:	59-3290474	FEI Number Applied For ( ) FEI Nu	mber Not Appli	licable ( ) Certificate of Status Desired (X)
Name and	Address of Cu	rrent Registered Agent:	Name and	Address of New Registered Agent:
	OONALD W RE	V		
2731 S HW	Y 77 EN, FL 32444	US		
2731 S HŴ LYNN HAVI	EN, FL 32444 named entity su		of changing it	ts registered office or registered agent, or both,
2731 S HW LYNN HAVI The above i	EN, FL 32444 named entity su of Florida.		of changing it	ts registered office or registered agent, or both,
2731 S HW LYNN HAVI The above in the State	EN, FL 32444 named entity su of Florida. E:		of changing it	ts registered office or registered agent, or both,  Date
2731 S HW LYNN HAVI The above in the State SIGNATUR	EN, FL 32444 named entity su of Florida. E:	bmits this statement for the purpose of Signature of Registered Agent		
2731 S HW LYNN HAVI The above in the State SIGNATUR	en, FL 32444 named entity su of Florida. E: Electronic	bmits this statement for the purpose of Signature of Registered Agent DRS:		Date
2731 S HW LYNN HAVI The above in the State SIGNATUR OFFICERS Title: Name: Address:	EN, FL 32444  named entity su of Florida.  E: Electronic  AND DIRECTO  D () D  RILEY, JESSIE G 6911 GREENFIE	bmits this statement for the purpose of Signature of Registered Agent  ORS: The left of the purpose of the purp	ADDITION: Title: Name: Address:	Date IS/CHANGES TO OFFICERS AND DIRECTORS:

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: DONALD W. SHOOTS RA 02/25/2005