2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004381

Apr 28, 2006 Secretary of State

FILED

Entity Name: ALTAR CHURCH OF CHRISTIANITY INC. OF MIMS

Current Principal Place of Business: New Principal Place of Business:

2565 NORTH U.S. HWY. 1 MIMS, FL 32754

Current Mailing Address: New Mailing Address:

P.O. BOX 372863 SATELLITE BEACH, FL 32937

FEI Number: 59-2835148 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MILLS, REV. JUDY

141 EDEN AVE.

MILLS, REV. JUDY

157 CHURCHILL AVENUE

SATELLITE BEACH, FL 32937 US SATELLITE BEACH, FL 32937 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: 04/28/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D () Delete Title: D (X) Change () Addition

 Name:
 MILLS, JUDITH
 Name:
 MILLS, JUDITH

 Address:
 141 EDEN AVE.
 Address:
 157 CHURCHILL AVENUE

 City-St-Zip:
 SATELLITE BEACH, FL
 City-St-Zip:
 SATELLITE BEACH, FL
 32937

Title: T () Delete Title: T (X) Change () Addition Name: GUEST, PHILLIP Name: GUEST, PHILLIP

Address: P.O BOX 372841 N/A Address: P.O BOX 372841 N/A City-St-Zip: SATELLITE BEACH, FL 32937

Title: D () Delete Title: D (X) Change () Addition Name: ROBERTS, PATRICIA Name: ROBERTS, PATRICIA

Name:ROBERTS, PATRICIAName:ROBERTS, PATRICIAAddress:157 CHURCHILL AVE.Address:157 CHURCHILL AVE.City-St-Zip:SATELLITE BEACH, FLCity-St-Zip:SATELLITE BEACH, FL32937

Title: D () Delete Title: D (X) Change () Addition Name: HUNTER, MELISSA Name: HUNTER, MELISSA

Address: 6473 ROBINSWOOD AVE. Address: 6473 ROBINSWOOD AVE.
City-St-Zip: BROOKSVILLE, FL City-St-Zip: BROOKSVILLE, FL 34602

Title: T () Delete Title: T (X) Change () Addition

 Name:
 WILLIAMS, MARTHA
 Name:
 WILLIAMS, MARTHA

 Address:
 3008 WILEY AVE.
 Address:
 3008 WILEY AVE.

 City-St-Zip:
 MIMS, FL
 City-St-Zip:
 MIMS, FL 32754

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.

SIGNATURE: JUDITH MILLS D 04/28/2006