## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000004683

Entity Name: LYNDIE MCCAULEY MINISTRIES, INC.

FILED Apr 19, 2005 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

10141 DEERCLIFF DR. 19772 VILLA CREEK DRIVE TAMPA, FL 33647 US TAMPA, FL 33647 US

Current Mailing Address: New Mailing Address:

10141 DEERCLIFF DR. 17992 VILLA CREEK DRIVE TAMPA, FL 33647 US TAMPA, FL 33647 US

FEI Number: 59-3295969 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:

MCCAULEY, LYNDIE REV.

10141 DEERCLIFF DRIVE
TAMPA, FL 33647 US

MCCAULEY, LYNDIE REV.
17992 VILLA CREEK DRIVE
TAMPA, FL 33647 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: LYNDIE MCCAULEY 04/19/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete Title: DP (X) Change ( ) Addition Name: MCCAULEY, LYNDIE REV Name: MCCAULEY, LYNDIE REV

 Address:
 10141 DEECLIFF DR.
 Address:
 17992 VILLA CREEK DRIVE

 City-St-Zip:
 TAMPA, FL 33647
 City-St-Zip:
 TAMPA, FL 33647

(X) Change ( ) Addition Title: () Delete Title: MCDONNOUGH, JANE REV. Name: Name: MCDONNOUGH, JANE REV. Address: 963 WICKER RUN DRIVE Address: 27631 PINE POINT DRIVE City-St-Zip: BRANDON, FL 33510 City-St-Zip: WESLEY CHAPEL, FL 33543

Title: DVP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BROWNE, HOWARD R DR.
 Name:

 Address:
 PO BOX 16057
 Address:

 City-St-Zip:
 TAMPA, FL 33647
 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: LYNDIE MCCAULEY DP 04/19/2005