


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 26, 2005 08:00 AM
Secretary of State

DOCUMENT # N94000005969 1. Entity Name DAVID VAN WINKLE MINISTRIES INC.	
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Principal Place of Business 1503 SOUTH MARY ST. EUSTIS, FL 32726 US	Mailing Address 1503 SOUTH MARY ST EUSTIS, FL 32726 US
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DO NOT WRITE IN THIS SPACE



07212005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-3278739	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**VAN WINKLE, DAVID M
1503 SOUTH MARY ST.
EUSTIS, FL 32726**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D VAN WINKLE, DAVID M 1503 SOUTH MARY ST EUSTIS, FL 32726
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BLANKENSHIP, RON 6013 BAY VALLEY CT. ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HOFMA, EDWARD A 3860 WYLDWOOD LANE ORLANDO, FL 32806
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MAJETICH, JILL 2926 EGLINGTON DR. ORLANDO, FL 32806
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MAJETICH, CHARLES G 2926 EGLINGTON DR. ORLANDO, FL 32806
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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IN THIS SPACE**

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~~07/26/05-01073-020 **61.25~~

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: David M. Van Winkle 7-22-05 352-516-9122
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #