2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 18, 2005
Secretary of State

DOCUMENT# N94000006104

Entity Name: THE EAGLES MINISTRY OF FIRE, INC.

Current Principal Place of Business:

1713 N. PINE AVE
OCALA, FL 34475 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2302
OCALA, FL 34478

New Mailing Address:

FEI Number: 59-3305308 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PATTERSON, DORIS M
1300 NW 67TH PLACE
OCALA, FL 34473 US

Name and Address of New Registered Agent:

PATTERSON, DORIS M
5602 NE JACKSONVILLE RD
OCALA, FL 34479 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: _____ 07/18/2005
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: PATTERSON, DORIS M.
Address: 4775 N.W. 27TH AVE
City-St-Zip: OCALA, FL 34475

Title: VPD ( ) Delete
Name: WRIGHT, LATYONIA A
Address: 4271 N.W. 21ST AVE.
City-St-Zip: OCALA, FL 34475

Title: VSTD ( ) Delete
Name: SWEET, LATASHA
Address: 4775 NW 27TH AVE.
City-St-Zip: OCALA, FL 34475

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: PATTERSON, DORIS M.
Address: 5602 NE JACKSONVILLE RD
City-St-Zip: OCALA, FL 34479

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VSTD (X) Change ( ) Addition
Name: SWEET, LATASHA
Address: 5602 NE JACKSONVILLE RD
City-St-Zip: OCALA, FL 34479

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: DORIS M. PATTERSON PRES 07/18/2005
Electronic Signature of Signing Officer or Director — Date