

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000082

FILED
Apr 06, 2005
Secretary of State

Entity Name: SAINTS EQUIPPED TO EVANGELIZE, INC.

Current Principal Place of Business:

501 VILLAGE GREEN PKWY
SUITE 22
BRADENTON, FL 34209 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 587
BRADENTON, FL 342060587 US

New Mailing Address:

FEI Number: 65-0544687

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPATOLA, SALVATORE A
5314 19TH AVE. WEST
BRADENTON, FL 34209 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SALVATORE, SPATOLA
Address: 5314 19TH AVE W
City-St-Zip: BRADENTON, FL 34209

Title: CD () Delete
Name: CULPEPPER, BART
Address: 4925 70TH ST EAST
City-St-Zip: PALMETTO, FL 34221

Title: TD () Delete
Name: THOMAS, KEITH
Address: 1805 4TH ST W
City-St-Zip: BRADENTON, FL 34221

Title: SD () Delete
Name: MELCHIOR, DAVID
Address: 245 BRIGHTON CT
City-St-Zip: ENGLEWOOD, FL 34223

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SALVATORE, SPATOLA
Address: 5314 19TH AVE W
City-St-Zip: BRADENTON, FL 34209 US

Title: CD (X) Change () Addition
Name: CULPEPPER, BART
Address: 119 MONTICELLO
City-St-Zip: WEAVERVILLE, NC 28787 US

Title: TD (X) Change () Addition
Name: THOMAS, KEITH
Address: 4709 SNEAD ISLAND RD
City-St-Zip: PALMETTO, FL 34221 US

Title: SD (X) Change () Addition
Name: MELCHIOR, DAVID
Address: 245 BRIGHTON CT
City-St-Zip: ENGLEWOOD, FL 34223 US

Title: D () Change (X) Addition
Name: HOWARD, RUSSELL S
Address: 8848 FAWN RIDGE DR
City-St-Zip: FORT MYERS, FL 33912 US

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: SALVATORE A SPATOLA

D

04/06/2005

Electronic Signature of Signing Officer or Director

Date