

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90677 005 ****70.00

DOCUMENT # N96000000085					
1. Entity Name REACH MINISTRIES, INC.					
Principal Place of Business 117 S CENTER ST EUSTIS, FL 32726			Mailing Address 117 S CENTER ST EUSTIS, FL 32726		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3350780	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
SIELING, JAMES H 117 S CENTER ST EUSTIS, FL 32726			Name Street Address (P.O. Box Number is Not Acceptable) City		
SIELING, JAMES H 117 S CENTER ST EUSTIS, FL 32726			FL Zip Code		
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: <i>James Sieling</i> James Sieling Ex. Director 4/28/04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE P	NAME SIELING, JAMES H		TITLE C	NAME Tom Hofmeister	
STREET ADDRESS 117 S CENTER ST	CITY-ST-ZIP EUSTIS, FL 32726		STREET ADDRESS 117 S. Center St	CITY-ST-ZIP EUSTIS, FL 32726	
TITLE V	NAME SIELING, VENORAH		TITLE TS	NAME mike JOHNSON	
STREET ADDRESS 117 S CENTER ST	CITY-ST-ZIP EUSTIS, FL 32726		STREET ADDRESS 117 S. Center St.	CITY-ST-ZIP EUSTIS, FL 32726	
TITLE TS	NAME HEIL, SALLY		TITLE D	NAME ED Hargroves	
STREET ADDRESS 117 S CENTER ST	CITY-ST-ZIP EUSTIS, FL 32726		STREET ADDRESS 117 S Center St.	CITY-ST-ZIP EUSTIS, FL 32726	
TITLE C	NAME BAIN, WALLY		TITLE D	NAME Bill Schmidt	
STREET ADDRESS 117 S CENTER ST	CITY-ST-ZIP EUSTIS, FL 32726		STREET ADDRESS 117 S. Center St	CITY-ST-ZIP EUSTIS, FL 32726	
TITLE BMD	NAME GODFRIED, MIM		TITLE D	NAME michelle maddy	
STREET ADDRESS 117 S CENTER ST	CITY-ST-ZIP EUSTIS, FL 32726		STREET ADDRESS 117 S. Center St	CITY-ST-ZIP EUSTIS, FL 32726	
TITLE D	NAME FRANDSEN, MICHAEL		TITLE D	NAME Paul Searcy	
STREET ADDRESS 117 S CENTER ST	CITY-ST-ZIP EUSTIS, FL 32726		STREET ADDRESS 117 S. Center St	CITY-ST-ZIP EUSTIS, FL 32726	
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: <i>James Sieling</i> James Sieling 4/28/04 352-357 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					