2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 13, 2004
Secretary of State

DOCUMENT# N96000000700

Entity Name: APOSTOLIC MINISTERIAL, INC.

Current Principal Place of Business:

1201 BEA AVENUE
INVERNESS, FL 34452

New Principal Place of Business:

Current Mailing Address:

1201 BEA AVENUE
INVERNESS, FL 34452

New Mailing Address:

FEI Number: 59-3393880 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHEPHERD, DOUGLAS E JR.
1201 BEA AVENUE
INVERNESS, FL 34452 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: D ( ) Delete
Name: BRUCE, FREDDIE S
Address: 4245 TOM AVE
City-St-Zip: INVERNESS, FL 34452

Title: D ( ) Delete
Name: HAGANEY, JAMES
Address: 6122 SAGE ST
City-St-Zip: INVERNESS, FL 34452

Title: D ( ) Delete
Name: SHEPERD, DAVID
Address: 3200 E. FAWN CT.
City-St-Zip: INVERNESS, FL 34452

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: JAMES HAGANEY D 07/13/2004

Electronic Signature of Signing Officer or Director — Date