

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000809

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: RAD MINISTRIES, INC.

**Current Principal Place of Business:**

1810 IMESON RD  
JACKSONVILLE, FL 32220 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6483  
JACKSONVILLE, FL 322366483 US

**New Mailing Address:**

FEI Number: 59-3447091

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TAYLOR, A. REGINALD III  
1810 IMESON RD  
JACKSONVILLE, FL 32220 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: TAYLOR, A R III  
Address: 1810 IMESON RD  
City-St-Zip: JACKSONVILLE, FL

Title: VP ( ) Delete  
Name: TAYLOR, PAMELA  
Address: 1810 IMESON RD  
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete  
Name: WAINWRIGHT, ALLEN B III  
Address: 1716 GROVE PARK DRIVE  
City-St-Zip: ORANGE PARK, FL 32073

Title: TR ( ) Delete  
Name: FARRAH, KAREN  
Address: 9188 CAMSHIRE DR  
City-St-Zip: JACKSONVILLE, FL

Title: TR ( ) Delete  
Name: WURSTER, JAN  
Address: 3858 BOONE PARK AVE.  
City-St-Zip: JACKSONVILLE, FL

Title: TR ( ) Delete  
Name: EATMON, DUANE  
Address: 8355 SE 57TH DR  
City-St-Zip: OKEECHOBEE, FL

**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:

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: A. REGINALD TAYLOR III

P

04/29/2005

Electronic Signature of Signing Officer or Director

Date