

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001264

Entity Name: 2BLEEV MINISTRIES, INC.

FILED
Mar 12, 2004
Secretary of State**Current Principal Place of Business:**2771 GLEN EDEN DRIVE
PENSACOLA, FL 32514**New Principal Place of Business:****Current Mailing Address:**2771 GLEN EDEN DRIVE
PENSACOLA, FL 32514**New Mailing Address:**

FEI Number: 59-3368665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:CAPEHART, LEE V
2771 GLEN EDEN DRIVE
PENSACOLA, FL 32514 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: PD () Delete
Name: CAPEHART, LEE V
Address: 2771 GLEN EDEN DRIVE
City-St-Zip: PENSACOLA, FL 32514Title: VD () Delete
Name: CAPEHART, YVONNE L
Address: 2771 GLEN EDEN DRIVE
City-St-Zip: PENSACOLA, FL 32514Title: D () Delete
Name: WHITEN, TAMARA
Address: 3020 W BRAINARD ST
City-St-Zip: PENSACOLA, FL 32505Title: S () Delete
Name: KYLES, LATEECE
Address: 3020 W BRAINARD ST
City-St-Zip: PENSACOLA, FL 32505Title: D () Delete
Name: KENLAW, ELEANOR
Address: 905 ARTESIAN
City-St-Zip: PENSACOLA, FL 32505**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: LEE V. CAPEHART

PD

03/12/2004

Electronic Signature of Signing Officer or Director

Date