

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000001501

**FILED**  
**May 24, 2004**  
**Secretary of State****Entity Name:** THE VINEYARD SCHOOL OF JESUS CHRIST, CENTER FOR TRANSFORMATION AND REBIRTH INC.**Current Principal Place of Business:**1301 S.E. 1ST AVE.  
DEERFIELD BEACH, FL 33441**New Principal Place of Business:****Current Mailing Address:**1301 S.E. 1ST AVE.  
DEERFIELD BEACH, FL 33441**New Mailing Address:****FEI Number:** 65-0664897**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**MITCHELL, DR. GEORGE W  
1301 S.E. 1ST AVE.  
DEERFIELD BEACH, FL 33441 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:** TS ( ) Delete  
**Name:** HUTCHINSON, MARCIA  
**Address:** 1339 EAST GLEN OAK ROAD  
**City-St-Zip:** NORTH LAUDERDALE, FL 33068**Title:** VPT ( ) Delete  
**Name:** EVANS, GAYLE  
**Address:** 688 NW 20TH ST  
**City-St-Zip:** POMPANO BEACH, FL 33060**Title:** PD ( ) Delete  
**Name:** MITCHELL, GEORGE DR  
**Address:** 1301 S.E. 1ST AVE.  
**City-St-Zip:** DEERFIELD BEACH, FL 33441**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: GEORGE MITCHELL

PD

05/24/2004

Electronic Signature of Signing Officer or Director

Date