## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000001971

City-St-Zip:

LAKELAND, FL 33801

Entity Name: GOD'S REFLIGE MINISTRIES INC

FILED Apr 28, 2005 Secretary of State

That y Name Cop of the Cop in the Printer, into						
Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
1014 MLK SEFFNER	BLVD , FL 33584					
Current M	lailing Addres	ss:	New Maili	New Mailing Address:		
PO BOX 3 BRANDON	732 N, FL 3350937	752				
FEI Number:	: 59-3392715	FEI Number Applied For()	FEI Number Not Appl	icable()	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
BOYETTE, CHRISTINE 1923 SAWMILL ROAD BRANDON, FL 33511 US			1923 SAWI	BOYETTE, CHRISTINE 1923 SAWMILL ROAD BRANDON, FL 33510 US		
	named entity e of Florida.	submits this statement for the p	ourpose of changing it	ts registered	office or registered agent, or both,	
SIGNATURE:				04/28/2005		
	Electron	nic Signature of Registered Age	ent	Date		
OFFICERS	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	V ( HOWARD, ZEN 3304 BALLAST TAMPA, FL 33	PT BLVD	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	FS ( REDOICK, TEF 819 SPICEWO LAKELAND, FL	OD DRIVE	Title: Name: Address: City-St-Zip:	RAIFORD, TAI	ND GATE DRIVE	
Title: Name: Address: City-St-Zip:	D ( BOYETTE, TIM 1923 SAWMILI BRANDON, FL	_ ROAD	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( LIGHTSEY, DA 324 W WELLIN LAKELAND, FL	IGTON DR	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address:	REDDICK, WA	) Delete LTER JR GROVE DR APT #99	Title: Name: Address:	(	) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: CHRISTINE BOYETTE PAST 04/28/2005