

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006269

FILED
Jul 05, 2005
Secretary of State

Entity Name: REDEEMING FAITH MINISTRIES, INCORPORATION

Current Principal Place of Business:

9914 ALAHA RIVER LANE
GIBSONTON, FL 33534 US

New Principal Place of Business:

Current Mailing Address:

9914 ALAHA RIVER LANE
GIBSONTON, FL 33534 US

New Mailing Address:

FEI Number: 31-1496082 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

REAVES, TERRANCE
9914 ALAFIA RIVER LANE
GIBSONTON, FL 333534 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: JOHNSON, EARL
Address: P.O. BOX 1942
City-St-Zip: DUARTE, CA 91009 US

Title: PD () Delete
Name: REAVES, TERRANCE E
Address: 9914 ALAFIA RIVER LANE
City-St-Zip: GIBSONTON, FL 33534 US

Title: D () Delete
Name: REAVES, ROBIN
Address: 9914 ALAFIA RIVER LANE
City-St-Zip: GIBSONTON, FL 33534

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: TERRANCE E REAVES

PD

07/05/2005

Electronic Signature of Signing Officer or Director

Date