2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2005
Secretary of State

DOCUMENT# N97000002491

Entity Name: TRUE WITNESS CHURCH OF JESUS CHRIST APOSTOLIC, INC.

Current Principal Place of Business:

185 NW 30TH AVE
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

PO BOX 666806
POMPANO BEACH, FL 33066

New Mailing Address:

FEI Number: 65-0749372 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MCKOY, HENRY J SR
185 NW 30TH AVE
POMPANO BEACH, FL 33069 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:	DP	( ) Delete
Name:	MKOY, HENRY J SR	
Address:	185 NW 30TH AVE	
City-St-Zip:	POMPANO BEACH, FL 33069	
Title:	DS	( ) Delete
Name:	LOWERY, RUTH	
Address:	185 NW 30TH AVE	
City-St-Zip:	POMPANO BEACH, FL 33069	
Title:	DVP	( ) Delete
Name:	MCKOY, EULEM P	
Address:	185 NW 30TH AVE	
City-St-Zip:	POMPANO BEACH, FL 33069	
Title:	O	( ) Delete
Name:	JONES-THOMPSON, HYACINTH	
Address:	185 NW 30TH AVE	
City-St-Zip:	POMPANO BEACH, FL 33069	
Title:	O	( ) Delete
Name:	DOUGLAS, LLOYD	
Address:	185 NW 30TH AVE	
City-St-Zip:	POMPANO BEACH, FL 33069	
Title:	O	( ) Delete
Name:	THOMAS, WINSTON	
Address:	185 NW 30TH AVE	
City-St-Zip:	POMPANO BEACH, FL 33069	

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:	
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: EULEM P. MCKOY VP 01/31/2005

Electronic Signature of Signing Officer or Director — Date