2005 NOT-FOR-PROFIT CORPORATION

	ANNUAL F	TEPUNI (AN)			FILED		
DOCUMENT # N9700003432  1. Entity Name				May 02, 2005 08:00 AM Secretary of State			
GETHSEN INC.	MANE ECONOMIC & EDUC	CATIONAL MINISTRY,			our courty or	~ • • • • • • • • • • • • • • • • • • •	
Principal Place of Business Mai		Mailing Address					
700 HAZZARD AVE. EUSTIS FL 32726		700 HAZZARD AVE. EUSTIS FL 32726					
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE CR2E037 (10/04)			
City & State		City & State		4. FEI Number 59	9-3450452	! ! '	plied For t Applicat!
Zip	Country	Zip	Country	5. Certificate of Sta		\$8.75 Add Fee Required	
	6. Name and Address of Currer	nt Registered Agent	Name	7. Name and Addr	ess of New Registered A	gent	-
HAWKINS, WILLIAM 700 HAZZARD AVE.			Street Address		lot Acceptable)		
	STIS FL 32726		, , , ,		<del></del>	· · ·	
			City		FL	Zip Code	e
	named entity submits this statement	for the purpose of changing its	registered office or regis	stered agent, or both, in t	· · · -	( amiliar with,	and accept
	tions of registered agent.			•			
			E Registered Agent signature requi		·· · DATE	····	• • • • • •
the obligat	tions of registered agent	ent and title if applicable (NOTE	npaign Financing				
the obligat	Signature, typed or printed name of registered age  FILE NOW; FEE IS \$61.25	ent and title if applicable (NOTE  9. Election Can  Trust Fund C	npaign Financing	\$5.00 May Be Added to Fees	DATE Make Check	ment of S	State
the obligat	Signature, typed or printed name of registered age FILE NOW: FEE IS \$61.25 Due By May 1, 2005  OFFICERS AND D	ent and title if applicable (NOTE  9. Election Can  Trust Fund C	npaign Financing Contribution.	\$5.00 May Be Added to Fees	Make Check Florida Depart	ment of S	State
the obligated signature.  SIGNATURE.  10.  TITLE  NAME	Signature, typed or printed name of registered age FILE NOW: FEE IS \$61.25 Due By May 1, 2005  OFFICERS AND DE HAWKINS, WILLIAM	9. Election Can Trust Fund C	npaign Financing Contribution.	\$5.00 May Be Added to Fees ADDITIONS/CHANGE	Make Check Florida Depart	ment of S RECTORS IN Change	State  10  Addition
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the obligated signature.  10.  THE NAME STREET ADDRESS CITY ST-ZIP	Signature, typed or printed name of registered age FILE NOW: FEE IS \$61.25 Due By May 1, 2005  OFFICERS AND DE HAWKINS, WILLIAM 700 HAZZARD AVE. EUSTIS FL 32726 DS	9. Election Can Trust Fund C	npaign Financing Contribution.   11.  TITLE NAME STREET ADDRESS CLIY-ST-ZIP TITLE	\$5.00 May Be Added to Fees ADDITIONS/CHANGE	Make Check Florida Depart	ment of S RECTORS IN Change	State  10  Addition
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM HAWKINS, William Hawkins
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-05 352-589-1360