2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000006898

FILED May 13, 2003 Secretary of State

Entity Name: THE ETERNAL GUIDING LIGHT FAITH MINISTRIES AND COMMUNITY DEVELOPMENT

CORPORATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2420 NW 6 ST

POMPANO BEACH, FL 33069 US

Current Mailing Address: New Mailing Address:

P.O. BOX 666836

POMPANO BEACH, FL 33066

FEI Number: 65-0798165 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MCCLEOD, GARY B 2420 NW 6 ST

POMPANO BEACH, FL 33069 US

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.

01011471105

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition

Name: DERICO, CHARLES Name: Address: 2551 NW 5TH ST. Address:

Address: 2551 NW 51H 51. Address: City-St-Zip: POMPANO BEACH, FL 33069 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 HUNTER, WALTER
 Name:

 Address:
 1250 NW 27 AVE.
 Address:

 City-St-Zip:
 POMPANO BEACH, FL 33069
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 BYNUM, JANICE
 Name:

 Address:
 2413 NW 6 STREET
 Address:

 City-St-Zip:
 POMPANO BEACH, FL 33069
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 JACKSON, JOYCE
 Name:

 Address:
 360 NW 14 STREET
 Address:

 City-St-Zip:
 POMPANO BEACH, FL 33060
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 TALTON, JOHNNY L
 Name:

 Address:
 2651 NW 2 STREET
 Address:

 City-St-Zip:
 POMPANO BEACH, FL 33069
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 PHOENIX, PAMELA
 Name:

 Address:
 5910 N.E. 1ST AVE.
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33334
 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: CHARLES DERICO D 05/13/2003