

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000811

FILED
Apr 29, 2006
Secretary of State

Entity Name: CONCEPTS & PRECEPTS MINISTRIES, INC.

Current Principal Place of Business:

24 PLANTERS CIR
QUINCY, FL 32352

New Principal Place of Business:

Current Mailing Address:

24 PLANTERS CIR
QUINCY, FL 32352

New Mailing Address:

FEI Number: 59-3501285

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLMES, PAUL
24 PLANTERS CIR
QUINCY, FL 32352 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: HOLMES, PAUL
Address: 4745 JACKSON BLUFF RD. LOT 108
City-St-Zip: TALLAHASSEE, FL 32310

Title: D () Delete
Name: HOLMES, SHIRLEY M
Address: 4745 JACKSON BLUFF RD. LOT 108
City-St-Zip: TALLAHASSEE, FL 32310

Title: ST () Delete
Name: HALL, SYLVIA
Address: 857 W. DENT ST
City-St-Zip: TALLAHASSEE, FL 32304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HOLMES, PAUL
Address: 24 PLANTERS CIRCLE
City-St-Zip: QUINCY, FL 32352

Title: D (X) Change () Addition
Name: HOLMES, SHIRLEY M
Address: 24 PLANTERS CIRCLE
City-St-Zip: QUINCY, FL 32352

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 Chapter 119, 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: PAUL HOLMES

D

04/29/2006

Electronic Signature of Signing Officer or Director

Date