

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 22, 2006 8:00 am**  
**Secretary of State**

03-22-2006 90003 030 \*\*\*\*61.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                         |                                                                                                                                                                                                                           |                                                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| <b>DOCUMENT # N98000000813</b><br>1. Entity Name<br><b>RUTH R. SPEIGHTS MINISTRIES, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                         |                                                                                                                                                                                                                           |                                                                              |
| Principal Place of Business<br><b>3548 CANGROVE ROAD</b><br><b>TALLAHASSEE, FL 32303 US</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                         | Mailing Address<br><b>3548 CANGROVE ROAD</b><br><b>TALLAHASSEE, FL 32303 US</b>                                                                                                                                           |                                                                              |
| 2. Principal Place of Business<br><b>4344 Carnwath Rd.</b><br>Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                         | 3. Mailing Address<br><b>4344 Carnwath Road</b><br>Suite, Apt. #, etc.                                                                                                                                                    |                                                                              |
| City & State<br><b>Tallahassee FL</b><br>Zip Country<br><b>32303 US</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                         | City & State<br><b>Tallahassee FL</b><br>Zip Country<br><b>32303 US</b>                                                                                                                                                   |                                                                              |
| 4. FEI Number<br><b>59-3497730</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                         | Applied For<br><input type="checkbox"/> Not Applicable                                                                                                                                                                    |                                                                              |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                         | <b>\$8.75</b> Additional Fee Required                                                                                                                                                                                     |                                                                              |
| 6. Name and Address of Current Registered Agent<br><br><b>SPEIGHTS, RUTH R</b><br><b>3548 CANGROVE ROAD</b><br><b>TALLAHASSEE, FL 32303</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                         | 7. Name and Address of New Registered Agent<br>Name <b>Speights, Ruth R</b><br>Street Address (P.O. Box Number is Not Acceptable)<br><b>4344 Carnwath Road</b><br>City <b>Tallahassee</b> <b>FL</b> Zip Code <b>32303</b> |                                                                              |
| 8. 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. I am familiar with, and accept the obligations of registered agent.                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                         |                                                                                                                                                                                                                           |                                                                              |
| SIGNATURE _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                         |                                                                                                                                                                                                                           |                                                                              |
| <b>Filing Fee is \$61.25</b><br><b>Due by May 1, 2006</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                         | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>                                                                                                                                          |                                                                              |
| <b>\$5.00</b> May Be Added to Fees                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                         | Make check payable to<br><b>Florida Department of State</b>                                                                                                                                                               |                                                                              |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                         | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>                                                                                                                                                              |                                                                              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | DP<br>SPEIGHTS, RUTH R<br>3548 CANGROVE ROAD<br>TALLAHASSEE, FL 32303   | <input type="checkbox"/> Delete                                                                                                                                                                                           | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | DS<br>SPEIGHTS, GREGORY<br>3548 CANGROVE ROAD<br>TALLAHASSEE, FL 32303  | <input type="checkbox"/> Delete                                                                                                                                                                                           | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | DT<br>SPEIGHTS, JONATHAN<br>3548 CANGROVE ROAD<br>TALLAHASSEE, FL 32303 | <input type="checkbox"/> Delete                                                                                                                                                                                           | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | DT<br>Speight, Jonathan<br>4344 Carnwath Rd<br>Tallahassee, FL 32303    | <input type="checkbox"/> Delete                                                                                                                                                                                           | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | DT<br>Speights, Gregory<br>4344 Carnwath Road<br>Tallahassee, FL 32303  | <input type="checkbox"/> Delete                                                                                                                                                                                           | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | DT<br>Speights, Ruth R.<br>4344 Carnwath Road<br>Tallahassee FL 32303   | <input type="checkbox"/> Delete                                                                                                                                                                                           | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | DT<br>Speights, Ruth R.<br>4344 Carnwath Road<br>Tallahassee FL 32303   | <input type="checkbox"/> Delete                                                                                                                                                                                           | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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. |                                                                         |                                                                                                                                                                                                                           |                                                                              |
| <b>SIGNATURE:</b> <u>Ruth R. Speights</u> (850) 562-7719 3/20/2006<br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                         |                                                                                                                                                                                                                           |                                                                              |