2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2005
Secretary of State

DOCUMENT# N98000001638

Entity Name: THE SHARE HIS LOVE MISSIONS, INC.

Current Principal Place of Business:

1930 N.W. 12TH ROAD
GAINESVILLE, FL 32605

New Principal Place of Business:

1326 E EARLL DRIVE
PHOENIX, AZ 85014

Current Mailing Address:

1930 N.W. 12TH ROAD
GAINESVILLE, FL 32605

New Mailing Address:

1326 E EARLL DRIVE
PHOENIX,, AZ 95014

FEI Number: 31-1594729 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLOCKS, ROBERT MAX
1930 N.W. 12TH ROAD
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

PARKER, JOHN
2110 B.W. 46TH STREET
GAINESVILLE, FL 32605 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.

SIGNATURE: JOHN PARKER 04/17/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PARKER, JOHN A REV.
Address: 2110 N.W. 46TH STREET
City-St-Zip: GAINESVILLE, FL 32605

Title: STD ( ) Delete
Name: WILLOCKS, NEYSA F
Address: 1930 N.W. 12TH ROAD
City-St-Zip: GAINESVILLE, FL 32605

Title: D ( ) Delete
Name: PRUITT, WILLIAM H DR.
Address: 5621 N.W. 34TH STREET
City-St-Zip: GAINESVILLE, FL 32653

Title: P ( ) Delete
Name: WILLOCKS, ROBERT MAX
Address: 1930 N.W. 12TH ROAD
City-St-Zip: GAINESVILLE, FL 32605

Title: D ( ) Delete
Name: LONG, HOWARD
Address: 6114 N.W. 33RD STREET
City-St-Zip: GAINESVILLE, FL 32653

Title: D ( ) Delete
Name: OPPELT, HERMAN
Address: 18311 N.W. 28TH PL.
City-St-Zip: NEWBERRY, FL 326692150

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: ROBERT MAX WILLOCKS PRES 04/17/2005
Electronic Signature of Signing Officer or Director Date