

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003467

FILED
Apr 29, 2005
Secretary of State

Entity Name: THE PLAIN TRUTH MINISTRY CORPORATION

Current Principal Place of Business:

P.O. BOX 245
MCINTOSH, FL 32664

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 245
MCINTOSH, FL 32664

New Mailing Address:

FEI Number: 52-2171791

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARR, JIMMY
15354 OLD GAINESVILLE ROAD
REDDICK, FL 32628 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: P () Delete
Name: CARR, JIMMY
Address: NORTH HIGHWAY 441 21121
City-St-Zip: MCINTOSH, FL 32664

Title: AP () Delete
Name: RICHARDSON, TAMMY
Address: NORTH HIGHWAY 441 21121
City-St-Zip: MCINTOSH, FL 32664

Title: MIN () Delete
Name: CARR, CONTINA
Address: 3103 N.E. 1ST, APT 64
City-St-Zip: GAINESVILLE, FL 32609

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:

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: JIMMY CARR

PAST

04/29/2005

Electronic Signature of Signing Officer or Director

Date