


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 10, 2005 08:00 AM
Secretary of State

DOCUMENT # N98000003889 1. Entity Name G.L.G. MINISTRIES, INC.	
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Principal Place of Business 9821 BUNKER RD LEESBURG FL 34788	Mailing Address 9821 BUNKER RD LEESBURG FL 34788
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DO NOT WRITE IN THIS SPACE

03072005 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0851416	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent GREER, GARY L 9821 BUNKER RD LEESBURG, FL 34788

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GREER, GARY L 9821 BUNKER RD LEESBURG, FL 34788
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDI GREER, CHERI M 9821 BUNKER RD LEESBURG, FL 34788
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BAKER, CHERYL J 10509 GOOSE PRAIRIE RD LEESBURG, FL 34788
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000258716
03/10/05-80052-009 70.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE: *Gary L Greer*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-7-05 352-315-0762
Date Daytime Phone #