

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006662

Entity Name: ALEXANDER BOSTIC MINISTRIES, INC.

FILED
Jan 18, 2004
Secretary of State

Current Principal Place of Business:

17211 N.W. 22ND AVENUE
MIAMI, FL 33056

New Principal Place of Business:

Current Mailing Address:

17211 N.W. 22ND AVENUE
MIAMI, FL 33056

New Mailing Address:

FEI Number: 65-0875463

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOSTIC, ALEXANDER JR
17211 N.W. 22ND AVENUE
MIAMI, FL 33056 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: DP () Delete
Name: BOSTIC, ALEXANDER JR
Address: 17211 N.W. 22ND AVE.
City-St-Zip: MIAMI, FL 33056

Title: DS () Delete
Name: BOSTIC, ALICE D
Address: 17211 N.W. 22ND AVENUE
City-St-Zip: MIAMI, FL 33056

Title: TD () Delete
Name: CLARK, SHELDON
Address: 17211 N.W. 22ND AVENUE
City-St-Zip: MIAMI, FL 33056

Title: T () Delete
Name: WILLENE, TODD
Address: 2931 NW 208TH TERR
City-St-Zip: MIAMI, FL 33055

Title: T () Delete
Name: SILER, PAMELA D
Address: 2550 N.W. 160TH ST
City-St-Zip: MIAMI, FL 33054

Title: T () Delete
Name: BOSTIC, ALEXANDER III
Address: 17211 N.W. 22ND AVENUE
City-St-Zip: MIAMI, FL 33056

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: ALEXANDER BOSTIC, JR

DP

01/18/2004

Electronic Signature of Signing Officer or Director

Date