


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2006 08:00 AM
Secretary of State

DOCUMENT # N99000000947	
1. Entity Name BISHOP JOHN W. SNELL MINISTRIES, INC.	

Principal Place of Business 181 VERMONT AVE FT LAUDERDALE, FL 33312	Mailing Address 181 VERMONT AVE FT LAUDERDALE, FL 33312
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01192006 No Chg-NP CR2E037 (11/05)

4. FEI Number 31-1688632	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent	
SNELL, JOHN W 181 VERMONT AVE FT LAUDERDALE, FL 33312	

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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 <i>Bishop John W. Snell</i> <small>Signature typed or printed name of registered agent and title if applicable.</small>	DATE <i>1/20/06</i> <small>(NOTE: Registered Agent signature required when reinstating)</small>

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO SNELL, JOHN W 181 VERMONT AVE FT LAUDERDALE, FL 33312	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MASTEN, CYNTHIA 4600 NW 49TH CT TAMARAC, FL 33319	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SNELL, LOUISE 181 VERMONT AVE FT LAUDERDALE, FL 33312	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

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U00000401737
02/02/06-80058-002 61.25

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.	
SIGNATURE: <i>Bishop John W. Snell</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	DATE <i>1/20/06</i> <small>Daytime Phone #</small>