

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001133

FILED  
May 21, 2004  
Secretary of State

Entity Name: VESSELS OF HONOR MINISTRIES, INC.

## Current Principal Place of Business:

2309 FORSYTHE CT.  
TALLAHASSEE, FL 32308

## New Principal Place of Business:

17522 NE MARGARET ST  
BLOUNTSTOWN, FL 32424

## Current Mailing Address:

2309 FORSYTHE CT.  
TALLAHASSEE, FL 32308

## New Mailing Address:

17522 NE MARGARET ST  
BLOUNTSTOWN, FL 32424

FEI Number: 59-3627384

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

POLSTON, DEBORAH  
2309 FORSYTHE CT  
TALLAHASSEE, FL 32308 US

## Name and Address of New Registered Agent:

COLLINS, MICHAEL  
17522 NE MARGARET ST  
BLOUNTSTOWN, FL 32424 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: MICHAEL D. COLLINS

05/21/2004

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: POLSTON, RICKY  
Address: 2309 FORSYTHE CT.  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete  
Name: POLSTON, DEBORAH  
Address: 2309 FORSYTHE CT.  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete  
Name: MCCARTY, EMILY  
Address: 6835 TOMMYLEE TRAIL  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D (X) Delete  
Name: FARIAS, CAROLYN  
Address: 129 BELAY WAY  
City-St-Zip: PENSACOLA, FL 32507

Title: D (X) Delete  
Name: PICHARD, SUSAN  
Address: PO BOX 13733  
City-St-Zip: TALLAHASSEE, FL 32317

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: COLLINS, MICHAEL  
Address: 17522 NE MARGARET ST  
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: D (X) Change ( ) Addition  
Name: TRACY, COLLINS  
Address: 17522 NE MARGARET ST  
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: D (X) Change ( ) Addition  
Name: POLSTON, DEBORAH  
Address: 2309 FORSYTHE CT.  
City-St-Zip: TALLAHASSEE, FL 32308

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: MICHAEL D. COLLINS

D

05/21/2004

Electronic Signature of Signing Officer or Director

Date