2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002057

FILED Jan 06, 2005 Secretary of State

Entity Name: STRONG TOWER CHRISTIAN FELLOWSHIP, INC.

Current Principal Place of Business: New Principal Place of Business: 90 S RIDGEWOOD AVE ORMOND BEACH, FL 32174 **Current Mailing Address: New Mailing Address:** P.O. BOX 730193 47 MARJORIE TRAIL ORMOND BEACH, FL 32173 ORMOND BEACH, FL 321748502 FEI Number: 59-3576730 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STRICKLAND, LINDA G MRS STRICKLAND, LINDA G MRS. 60 TOMOKA MEADOWS BLVD. 47 MARJORIÉ TRAIL ORMOND BEACH, FL 32174 ORMOND BEACH, FL 321748502 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: 01/06/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DURRANCE, ROBERT Name: Name: 1509 P STATE AVE Address: Address: City-St-Zip: HOLLY HILL, FL 32117 City-St-Zip: Title: Title: () Delete () Change () Addition DURRANCE, CHARLOTTE Name: Name: Address: 1509 P STATE AVE Address: City-St-Zip: HOLLY HILL, FL 32117 City-St-Zip: Title: () Delete Title: () Change () Addition EMMANUEL, CANDICE Name: Name: Address: 939 CENTER AVE Address: City-St-Zip: HOLLY HILL, FL 32117 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition CALVESTER, EMMANUEL Name: Name: 939 CENTER AVE Address: Address: City-St-Zip: HOLLY HILL, FL 32117 City-St-Zip: Title: () Delete Title: (X) Change () Addition STRICKLAND, PAUL STRICKLAND, PAUL Name: Name: 403 N NOVA ROAD 47 MARJORIE TRAIL Address: Address: ORMOND BEACH, FL 321745125 City-St-Zip: City-St-Zip: ORMOND BEACH, FL 321748502 Title: () Delete Title: (X) Change () Addition STRICKLAND, LINDA STRICKLAND, LINDA Name: Name: Address: 60 TOMOKA MEADOWS BLVD. Address: 47 MARJORIE TRAIL ORMOND BEACH, FL 321748502 ORMOND BEACH, FL 32174 City-St-Zip: 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: PAUL STRICKLAND P 01/06/2005