2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002789

Entity Name: REAL LIFE MINISTRIES, INC.

FILED Apr 24, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7520 W. WATERS AVE 9312 W FLORA STREET TAMPA, FL 33615 SUITE 11 TAMPA, FL 33615 **Current Mailing Address: New Mailing Address:** P.O. BOX 260276 9312 W FLORA STREET TAMPA, FL 33634 TAMPA, FL 33634 FEI Number: 59-3574508 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: GONZALEZ, ALAN F ESQ GRESHAM, GREGORY ESQ. 1515 RINGLÍNG BOULEVARD, SUITE 900 1602 W. SLIGH AVE. SARASOTA, FL 34236 SUITE 300 TAMPA, FL 33604 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: GREGORY GRESHAM 04/24/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: PTD () Delete () Change () Addition BALLANTYNE, SCOT Name: Name: 9312 W. FLORA ST Address: Address: City-St-Zip: TAMPA, FL 33615 City-St-Zip: Title: VDS () Delete Title: () Change () Addition BALLANTYNE, SUSAN Name: Name: Address: 9312 W. FLORA ST Address: City-St-Zip: TAMPA, FL 33615 City-St-Zip: Title: () Delete Title: () Change () Addition DEAN, JAMES Name: Name: 8907 WATERWAY DR Address: Address: City-St-Zip: TAMPA, FL 33635 City-St-Zip: Title: () Delete Title: () Change () Addition LEWIS, ROBERT T Name: Name: Address: 8501 RED SETTER LANE Address: City-St-Zip: CHARLOTTE, NC 28227 City-St-Zip: Title: () Delete Title: () Change () Addition MAYS, CHRIS Name: Name: 345 MONTGOMERY CIRCLE Address: Address: City-St-Zip: STEPHENS CITY, VA 22655 City-St-Zip: Title: () Delete Title: () Change () Addition RIZZO. DEBBIE Name: Name: Address: 7930 BAY POINT DR. B36 Address: TAMPA, FL 33615 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: SCOT B BALLANTYNE PTD 04/24/2004