2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # N99000002835

1. Entity Name

COURTYARD MEDIA MINISTRIES, INC.



FILED
May 03, 2005 08:00 AM
Secretary of State

Principal Place of Business

4516 PROCOURT EAST PRACENTON FL 34203 Mailing Address

4516 PROCOURT EAST BRADENTON FL 34203



04292005 No Chg-NP

CR2E037 (10/03)

FEI Number
 65-0916871

Applied For Not Applicab

5. Certificate of Status Desired

7)

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ESTELLE, RANDALL B 4516 PRO COURT EAST BRADENTON, FL 34203

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	e named entity submits this statement for tr tions of registered agent.	e purpose of changing its registered offi	ce or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and acce
SIGNATURE	Signature, typed or printed name of registered agent and	file if applicable. (NOTE, Registered Agent	signature	required when reinstating)	DATE
	Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	U0000360877 05/05/05-80052-004 70.00
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ESTELLE, RANDALL B 4516 PRO COURT EAST BRADENTON, FL 34203				
TITLE NAME STREET ADDRESS GITY-ST-ZIP	DS ESTELLE, ALYSIA D 4516 PRO COURT EAST BRADENTON, FL 34203				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV ESTELLE, NATHANAEL 4514 SABAL KEY DR. BRADENTON, FL 34203			DO	NOT WRITE
TITLE	DT MANCY			IN	THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

STREET ADDRESS

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P.O. BOX 272

BRADENTON, FL 34206

RATING

Randall B. Estelle

4/29/05

941-755-8568 Daytime Phone #