2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED May 03, 2004 8:00 am Secretary of State

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DOCUMENT # N9900002942 1. Entity Name DEDICATE YOUR CHILD BACK TO GOD, INC.					05	5-03-2004 910		70.00
4024 WATCH HILL RD. 40		Mailing Address 4024 WATCH HILL RD. ORLANDO, FL 32808			94081177			
				1		FOR DAME OF STREET		
Principal Place of Business Address Mailing Address								
150 W. 10TH STREET 1		150 W. 10TH	150 W. 10TH STREET		11211141 212 12112			
Suite, Apt.		Suite, Apt. #, etc.			04282004 Chg-f	NP CR2	E037 (10/03)	
City & State	Α	City & State		+	4. FEI Number		I Ān	plied For
					59-3641423		No	t Applicable
Zip	Country	Zip	Country		5. Certificate of Status	s Desired	\$8.75 Add	
32703	ORANGE	32703	ORANGE		7 Name and Address	a of Naur Bosister		·
	6. Name and Address of Current	7. Name and Address	a or new negrater	en Agent				
EADY, FAYBELLE F REV DR				Y, FAYBELLE F. REV. DR. Address (P.O. Box Number is Not Acceptable)				
	CH HILL RD.		Street A		O. Box Number is Not. 10TH STREE			
OKLANDO), FL 32808					-		
	**		City				Zip Cod	
			AI	POPK	Α,		FL 20032	703
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.							and accept	
uie obligati	ions or registered agent.							ļ
SIGNATURE Signature, hyperformed dame of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE DATE								
					minori conducting)		***	
	•		aign Financing		\$5.00 May Be Added to Fees	Make c	heck payable to partment of Si	
` 10 .	•	Trust Fund Co	aign Financing		\$5.00 May Be	Make ci Florida De	heck payable to partment of Si	ate
10. Tirle	Due by May 1, 2004	Trust Fund Co	aign Financing ntribution.		\$5.00 May Be Added to Fees	Make ci Florida De	heck payable to partment of Si	ate
	OFFICERS AND DIF VPD BEAMER, VIVIAN M REV	Trust Fund Col	aign Financing ntribution. 11. TITLE NAME		\$5.00 May Be Added to Fees	Make ci Florida De	heck payable to partment of SI D DIRECTORS IN	ate
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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.

U. 7 Edgrev. Dr. FAYBELLE F. EADY, PRES.4/29/04 4078 4936

ENTED MANEE OF SIGNARG OFFICER OF DIRECTOR

Date

Date

Daylore Phone #