

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005933

FILED  
Apr 21, 2005  
Secretary of State

**Entity Name:** PEREZ MINISTRIES INTERNATIONAL, INC.

**Current Principal Place of Business:**

902 SOUTH EDGEWOOD AVE.  
JACKSONVILLE, FL 32205 US

**New Principal Place of Business:**

**Current Mailing Address:**

902 SOUTH EDGEWOOD AVE.  
JACKSONVILLE, FL 32205

**New Mailing Address:**

**FEI Number:** 59-3597004

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

DICKERSON, ZELMA  
8370 EARL CIRCLE WEST  
JACKSONVILLE, FL 32219 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete  
Name: DICKERSON, ZELMA  
Address: 8370 EARL CIRCLE W.  
City-St-Zip: JACKSONVILLE, FL 32219

Title: T ( ) Delete  
Name: DICKERSON, MAURICE  
Address: 8370 EARL CIRCLE W.  
City-St-Zip: JACKSONVILLE, FL 32219

Title: T ( ) Delete  
Name: BROWN, SAMUEL  
Address: 5510 POTIER DR.  
City-St-Zip: JACKSONVILLE, FL 32209 US

Title: T ( ) Delete  
Name: SMART, LAVON  
Address: 1627 HELENA STREET  
City-St-Zip: JACKSONVILLE, FL 32208 US

Title: S ( ) Delete  
Name: LATIMER, TOSHA  
Address: 11050 HARTS ROAD, APT 1603  
City-St-Zip: JACKSONVILLE, FL 32218

Title: V ( ) Delete  
Name: DICKERSON, VINCENT  
Address: 8370 EARL CIRCLE W  
City-St-Zip: JACKSONVILLE, FL 32219

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ZELMA DICKERSON

PST

04/21/2005

Electronic Signature of Signing Officer or Director

Date