

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N99000006323 1. Entity Name HOLY GHOST TRIPLE PORTION MINISTRIES, INC.	
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Principal Place of Business 1750 N. LIME AVE SARASOTA FL 34234	Mailing Address 1750 N. LIME AVE SARASOTA FL 34234
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc. ✓
City & State	City & State
Zip	Country

FILED

04 MAY -6 AM 11:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



MOORE CR2E037 (11/03)

4. FEI Number 65-0963891	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent PHELPS, HENRY JR. 1762 24TH STREET SARASOTA FL 34234	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	DP PHELPS, HENRY JR. 1762 24TH STREET SARASOTA FL 34234 <input type="checkbox"/> Delete	TITLE	800035849458 <input type="checkbox"/> Change <input type="checkbox"/> Addition 05/11/04--01019--019 **\$1.25
TITLE	DVP PHELPS, ANGIE M 1762 24TH STREET SARASOTA FL 34234 <input checked="" type="checkbox"/> Delete	TITLE	S WHEELER, EDWARD 1762 24th ST. SARASOTA FL 34234 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	DS BENSON, BARBARA 1750 N. LIME AVE SARASOTA FL 34234 <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	DT JOHNSON, MARY 1326 14TH STREET SARASOTA FL 34234 <input checked="" type="checkbox"/> Delete	TITLE	AD Jason Jackson 1845 19th street Sarasota FL 34234 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Henry Phelps 5-6-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #