

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 30, 2004
Secretary of State**

DOCUMENT# N99000007442

Entity Name: SPIRIT AND TRUTH INTERNATIONAL MINISTRY INC.

Current Principal Place of Business:

6850 FOREST CITY RD
ORLANDO, FL 32810

New Principal Place of Business:

1126 SOUTH DIVISION STREET
ORLANDO, FL 32805

Current Mailing Address:

P.O. BOX 547485
ORLANDO, FL 32854

New Mailing Address:

FEI Number: 59-3613389 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOCKETT, TAMMY G PASTOR
6510 EDGEWATER DR
ORLANDO, FL 32810 US

Name and Address of New Registered Agent:

LOCKETT, TAMMY G PASTOR
P.O. BOX 540553
ORLANDO, FL 32854 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: TAMMY G LOCKETT 04/30/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CEOD () Delete
Name: LOCKETT, TAMMY F PASTOR
Address: 2607 HIAWATHA AVENUE
City-St-Zip: SANFORD, FL 32773

Title: DV () Delete
Name: CLEVELAND, DOROTHY
Address: 2607 HIAWATHA AVENUE
City-St-Zip: SANFORD, FL 32773

Title: DV () Delete
Name: NELSON, ELESIEA
Address: 2607 HIAWATHA AVENUE
City-St-Zip: SANFORD, FL 32773

Title: DV () Delete
Name: HUNTER, DIANE
Address: 2607 HIAWATHA AVENUE
City-St-Zip: SANFORD, FL 32773

Title: SD () Delete
Name: WRIGHT, PATRICIA
Address: 2607 HIAWATHA AVENUE
City-St-Zip: SANFORD, FL 32773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEOD (X) Change () Addition
Name: LOCKETT, TAMMY F PASTOR
Address: P.O. BOX 540553
City-St-Zip: ORLANDO, FL 32854

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: TAMMY G LOCKETT D 04/30/2004

Electronic Signature of Signing Officer or Director Date