2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005
Secretary of State

DOCUMENT# 708110

Entity Name: FIRST ASSEMBLY'S CHURCH ON THE RIDGE, INC. OF FROSTPROOF, FLORIDA

Current Principal Place of Business:

333 E. B. ST.
P.O. BOX 247
FROSTPROOF, FL 33843

New Principal Place of Business:

825 CR 630A
P.O. BOX 247
FROSTPROOF, FL 33843

Current Mailing Address:

333 E. B. ST.
P.O. BOX 247
FROSTPROOF, FL 33843

New Mailing Address:

825 CR 630A
P.O. BOX 247
FROSTPROOF, FL 33843

FEI Number: 59-2369998 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GALATI, KELLY P.
PO BOX 247
FROSTPROOF, FL 33843 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: PD ( ) Delete
Name: GALATI, KELLY P.
Address: 335 E. B STREET
City-St-Zip: FROSTPROOF, FL

Title: DS ( ) Delete
Name: CROSBY, RITA
Address: 40 E HALL ST
City-St-Zip: FROSTPROOF, FL 33843

Title: VD ( ) Delete
Name: OGBURN, TERRY
Address: 903 OLD AVON PARK RD
City-St-Zip: FROSTPROOF, FL 33843

Title: DT ( ) Delete
Name: TUCKER, CONNIE
Address: 241 TURKEY OAK TRAIL
City-St-Zip: FROSTPROOF, FL 33843

Title: D ( ) Delete
Name: DAVIS, KENNETH
Address: 116 MAXCY LANE
City-St-Zip: FROSTPROOF, FL 33843

Title: D ( ) Delete
Name: THOMSON, WILLIAM
Address: 504 WEST 7TH STREET
City-St-Zip: FROSTPROOF, FL 33843

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GALATI, KELLY P.
Address: 825 CR 630A
City-St-Zip: FROSTPROOF, FL

Title: DST (X) Change ( ) Addition
Name: BRASWELL, WILLIAM KEITH
Address: 406 WEBBER COURT
City-St-Zip: BABSON PARK, FL 33827

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

Title: D (X) Change ( ) Addition
Name: SELLERS, JAMES DAVID
Address: 1471 FORT MEADE ROAD
City-St-Zip: FROSTPROOF, FL 33843

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: GALATI, KELLY P. PD 04/28/2005
Electronic Signature of Signing Officer or Director — Date