


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # 708931

1. Entity Name
HOLY REDEEMER CHURCH OF GOD IN CHRIST, INC.



Principal Place of Business Mailing Address

2090 N.W. 26TH STREET P.O. BOX 8572
 FORT LAUDERDALE, FL 33311 US FT. LAUDERDALE, FL 33310-8572 US

DO NOT WRITE IN THIS SPACE



02022006 No Chg-NP CR2E037 (11/05)

4. FEI Number Applied For
59-5223171 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BRYAN, HARVEY D SR
1700 N.W. 27TH TERRACE
FT LAUDERDALE, FL 33311

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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: Harvey D. Bryan, Sr. DATE: 03/09/06

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

DATE: 03/22/06
 80057-008 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDC BRYAN, HARVEY D SR 1700 NW 27TH TERRACE FT LAUDERDALE, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD BRYAN, ALAMARIE M SR 1700 NW 27TH TERRACE FT LAUDERDALE, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COB BRYAN, HARVEY D SR 1700 N.W. 27TH TERRACE FT. LAUDERDALE, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRYAN, HARVEY D SR 1700 N.W. 27TH TERRACE FT. LAUDERDALE, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRYAN, EDRED C 15542 TODDSBURY LANE MANASSAS, VA 20112
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: [Signature] DATE: 03/09/06

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