2006, NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

	ANNUAL R	PAGE	1 of 2/2	onne					
DOCUMENT # 724953 1. Entity Name					FAGL	,	LEU		
THE CHURCH OF CHRIST WRITTEN IN HEAVEN, OF FLORIDA, INC.						2006 OCT 2	27 AM 8: 3	9	
Principal Place of Business Mailing Address						SECRETA	RY OF STATE	<u> </u>	
% ELDER THOMAS BROWN, PASTOR 1430 KINGS ROAD JACKSONVILLE FL 32209		% ELDER THOMAS BROWN, PASTOR 1430 KINGS ROAD JACKSONVILLE FL 32209			- 1	TALLAHA	SSEE FLORIC		
2. Principal Place of Business		3. Mailing Address C/o Thomas Brown, Bishop			i tress teon	- B itans brasa rathe aribba i	ere drumii eshiri urunii drumii drusi	ausmiti si ite:	
Suite, Apt. #, etc.		Suite, Apt. #, etc. 1110 W. 8TH STREET			1st MC	OORE C	CR2E037 (10/05)		
City & State		JACKSONVILLE, FL 322		İ	4. FEI Number	9-1869143		Applied For	
Zip	Country	Zip	Country		5. Certificate of S		\$8.75 / Fee Requ	Additional	
	6. Name and Address of Current I	Registered Agent			7. Name and Add	ress of New Re	gistered Agent		
200	NUM TUOLIA		Name	Name					
111	OWN, THOMAS O W 8TH STREET		Street /	Street Address (P.O. Box Number is Not Acceptable)					
JAC	KSONVILLE FL 32209								
			City				FL Zip C	ode	
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.									
0.0									
SIGNATURE									
	FILE NOW: FEE IS \$61.25 Due By May 1, 2006		\$5.00 May Be Added to Fees		e Check Payab Department o				
10.	OFFICERS AND DIR	ECTORS	11.	Al	DDITIONS/CHANG	ES TO OFFICERS	S AND DIRECTORS	IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BROWN, BISHOP THOMAS 1110 W. 8TH STREET JACKSONVILLE FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		000 11/08/06			e 🗆 Addition 25	
TITLE	BD	▼ Delete	TITLE	CD			☐ Chang	Addition	
NAME	POLLAR, BISHOP C.(BISHOP 1263 DANIEL STREET WAYCROSS GA	*	NAME STREET ADDRESS CITY-ST-ZIP	JONE 1524	S, BISHOP STUYVESAN NTON, NJ 08	W. J IT AVE. 1618		~	
	D MILLINER, BISHOP D.J. 14720 BUCHANAN STREET RICHMOND HEIGHTS FL	XIXI Delete	NAME STREET ADDRESS CITY-ST-ZIP	D BRON 7623 CINC	NSON, BISHO B GREENLAND CINNATTI, C	P FRED DRIVE DH 45237	☐ Changi	XX Addition	
	D GREEN, DEACON GEORGE F. ROUTE 1 SOPCHOPPY FL	XIX) Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUXTO 9 ROS SPRIN	ON, BISHOP SE AVENUE NG VALLEY,	SYDNEY NY 10977	☐ Change	Addition	
TITLE NAME	SD WILLIAMS, MADELINE 835 NW 63RD ST. MIAMI FL	XIX) Detete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS 7806	S, BISHOP G CAXTON CIF SONVILLE, F	REGORY	☐ Change	XX Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		XXX Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D INGRA 10200 PERRI	AHAM, BISHO) S W 171st [NE, FL 331	P J. T. STREET	☐ Change	X 🕅 Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

(904) 355-0130

*SIGNATURE:

nature and typed or printed name of signing officer or director

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	AIIIIVAE II	, Page 2/	2006							
DOCUMENT # 724953 1. Entity Name THE CHURCH OF CHRIST WRITTEN IN HEAVEN, OF										
FLORIDA, INC.					The state of	2000	OCT 27	AM 8: 4	0	
Principal Place of Business Mailing Address						ŞE	CRETARY (OF STAT	E	
% ELDER THOMAS BROWN, PASTOR 1430 KINGS ROAD JACKSONVILLE FL 32209		% ELDER THOMAS BROWN, PASTOR 1430 KINGS ROAD JACKSONVILLE FL 32209			I A L	LAHASSEE	: FLORIC	DA IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII		
2. Principal l	Place of Business	3. Mailing Address C/O Thomas, Brown, Bishop				141 6460 WW 01011 01011	510H 212H 215H 51	,EMIS, E, 1881		
Suite, Apt. #, etc.		Suite, Apt. #, etc. 1110 W. 8TH STREET			1st MOORE	CR2E037	7 (10/05)			
City & State		City & State JACKSONVILLE, FL 32		2209		4. FEI Number 59-1869	9143	J	pplied For lot Applicabl	
Zip	Country	Zip	Сои	ntry		5. Certificate of Status Desi	red 🗌	\$8.75 Ad Fee Require		
	6. Name and Address of Current I	Registered Agent			···	7. Name and Address of N	ew Registered	Agent		
	•			Name						
BROWN, THOMAS 1110 W 8TH STREET				Street Address (P.O. Box Number is Not Acceptable)						
JAC	CKSONVILLE FL 32209									
				City	City FL Zip Code					
B. 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										
	Signature, typed or privided name of registered agent a	nd title (appacable (NOT)	- Registered	Ageri signa	ture required :	when renstabil)	DATE			
FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution.						\$5.00 May Be Added to Fees	Make Chec lorida Depar			
10.	OFFICERS AND DIR		11.		A	DDITIONS/CHANGES TO OF	FICERS AND DI			
TITLE NAME	BROWN, BISHOP THOMAS	☐ Delete	TITLE NAME					Change	Addition	
STREET ADDRESS	1110 W. 8TH STREET			I ADDRESS	İ					
CITY-ST-ZIP	JACKSONVILLE FL		CITY-	ST-ZIP						
TITLE ·	BD SIGNAR OF SIGNAR	XXI Delete	TITLE		VD			Change	Addition	
NAME STREET ADORESS	POLLAR, BISHOP C.(BISHOP 1263 DANIEL STREET		NAME	T ADDRESS	POLL	OCK, BISHOP N.				
CITY-ST-ZIP	WAYCROSS GA			ST-ZIP	CHAT	_INĆOLN DRIVE FAHOOCHEE, FL 32	324			
TITLE	D	XX Delete	TITLE		D			☐ Change	XXAudition	
HAME	MILLINER, BISHOP D.J.		NAME		SCREE	EN, BISHOP A. T. E. BRINTON STREE	т			
STREET ADDRESS City-St-Zip	14720 BUCHANAN STREET RICHMOND HEIGHTS FL		STREE CITY-	TADORESS St-7P	DJJ PHIL	ADELPHIA, PA 191	.44			
TITLE	D	XIXI Delete	TITLE		D			☐ Chance	XX Addition	
NAME	GREEN, DEACON GEORGE F.	7420 Delate	NAME		ថ្មីរួមខ្លួ	S BISHOP GEOFFR 7TH STREET	EY	<u></u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
STREET ADDRESS	ROUTE 1			T ADDRESS	WILM]	TH STREET INGTON, DE 19802	!			
CITY-ST-ZIP	SOPCHOPPY FL		CITY-S	ST-ZIP		,				
TITLE .	SD WILLIAMS, MADELINE	(X) X) efete	TITLE NAME					☐ Change	Addition	
	835 NW 63RD ST.			T ADDRESS						
CFTY-ST-ZIP	MIAMI FL		CITY-S	ST-ZIP				<u> </u>		
TITLE		☐ Delete	TINLE					Change	Addition	
name Street adoress		:	NAME STREET	T ADDRESS						
CITY-ST-ZIP			CITY-S							
	certify that the information supplied with	this filing does not qualify for	r the exe	mptions (contained	in Section 119, Florida Statu	tes. I further cer	tify that the i	nformation	

2. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Horida Statutes. I turner 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 attactiment with an address, with a other like empowered.

*SIGNATURE:

THOMAS BROWN, BISHOP

(904)355-0130

Signature and typed or printed name of officer or director Date Phone