

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734282

FILED  
Apr 12, 2005  
Secretary of State

Entity Name: ARLINGTON ASSEMBLY OF GOD, INC.

**Current Principal Place of Business:**

88 ARLINGTON ROAD  
JACKSONVILLE, FL 32211

**New Principal Place of Business:**

**Current Mailing Address:**

88 ARLINGTON ROAD  
JACKSONVILLE, FL 32211

**New Mailing Address:**

FEI Number: 59-1512672

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WARREN, JULIAN  
345 E FORSYTH ST  
JACKSONVILLE, FL 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: DP ( ) Delete  
Name: CROOK, RICK E  
Address: 4026 SBEL DRIVE  
City-St-Zip: JACKSONVILLE, FL 32277

Title: T ( ) Delete  
Name: MORRISON, VIRGINIA  
Address: 4917 TOP ROYAL LANE  
City-St-Zip: JACKSONVILLE, FL 32277

Title: S ( ) Delete  
Name: DEAREN, RENEE  
Address: 12632 MISSION HILL CIRCLE N.  
City-St-Zip: JACKSONVILLE, FL 32225

Title: VD ( ) Delete  
Name: RAWLS, ROBERT  
Address: 632 BARBADOS RD.  
City-St-Zip: JACKSONVILLE, FL 32216

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: RICK E. CROOK

DP

04/12/2005

Electronic Signature of Signing Officer or Director

Date