2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

>

FILED Jul 14, 2006 8:00 am Secretary of State

DOCUMENT # 735923 1. Entity Name HOLLEY ASSEMBLY OF GOD, INC.				^	07-14-2006 90028 001 ****70.00			
Principal Place 4006 HWY 8 NAVARRE, FI	7	Mailing Address % Norman G. Coleman 9507 Acorn Lane Navarre, FL 32566		1 HARD (SEEL 1951)				
Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 4006 Highway 87 Suite, Apt. #, etc.			<u> </u>			
					ng-NP CR2E037 (4/06)			
City & State		City & State Navarre, FL		4. FEI Number 59-354842	^ 	pplied For ot Applicable		
Zip		21p 32566	Country USA	5. Certificate of Sta	Fee Require			
	6. Name and Address of Current Reg	istered Agent	Name —		ress of New Registered Agent			
	RUFUS E.		Street Addre	Deneen L. Kowan				
	8805 WAYNELL CT NAVARRE, FL. 32566			Street Address (P.O. Box Number, is Not Acceptable)				
			City No	varre .	FL Zip Coc	ie 51010		
	named entity submits this statement for the	e purpose of changing its re			the State of Florida. I am familiar with	, and accept		
SIGNATURE	Morrow St. Cole Signature, typed or printed name of registered agent and t	illo il applicable. (NOTE:	Registered Agent signature rea	quired when reinstating)	7/11/06 DATE			
Filing Fee is \$61.25 Due by September 6, 2006 9. Election Campaign Trust Fund Contrib				\$5.00 May Be Added to Fees	Make check payable t Florida Department of S			
10.	OFFICERS AND DIRECT		11.	ADDITIONS/CHANGE	ES TO OFFICERS AND DIRECTORS IN			
NAME STREET ADDRESS CITY-ST-ZIP	COLEMAN, NORMAN G 9507 ACORN LANE NAVARRE, FL 32566	☐ Delete	TITLE NAME STREET ADORESS CITY-ST-ZIP		☐ Change	☐ Addition		
TITLE NAME STREET ADDRESS CETY-ST-ZIP	D ROSE, III, RUFUS E 8805 WAYNELL CT NAVARRE, FL 32566	Detete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TURNER, MARK C 2081 RIVER BIRCH RD. GULF BREEZE, FL 32563	□ Detete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TOLBERT, TEDDIE LAMAR 3675 GINGER LANE NAVARRE, FL 32566	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Wendell M. Rowar 2019 Alfred Blyd Navarre, FL. 32566	Jr □ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Joshua Craig 2208 Calle De Ma Navarre A. 325	□ Delete rbella	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition		
12. I hereby	certify that the information supplied with this	s filing does not qualify for t	he exemptions contain	ined in Chapter 119, Flori	ida Statutes. I further certify that the in	nformation		

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:	1)orman	D. Coleman			1
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				18

ATTACHMENT 20049090 #735923

Please note that I did not receive my initial armual Report Joemo By Mail. I was told it could get an examplion from the late fees.

Please notify me if it need to fill out paper work to apply for the excemption.

Manh you!

Deneen Power