## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 736748** 

FILED Jul 08, 2008 Secretary of State

Entity Name: FIRST ASSEMBLY OF GOD OF MILTON, MILTON, FLORIDA, INCORPORATED

**Current Principal Place of Business: New Principal Place of Business:** 6163 DOGWOOD RD. MILTON, FL 32570 **Current Mailing Address: New Mailing Address:** 6163 DOGWOOD RD. MILTON, FL 32570 FEI Number: 59-2684496 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHAD, BARBARA MARSHALL, BARBARA 5712 BRONCO PL 5712 BRONCO PL MILTON, FL 32570 US MILTON, FL 32570 US 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: BARBARA MARSHALL 07/08/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ROGERS, FRED E., Name: Name: 5756 MILL POND LN Address: Address: City-St-Zip: MILTON FL. City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete SCHAD, BARBARA Name: MARSHALL, BARBARA Name: Address: 5712 BRONCO PL Address: 5712 BRONCO PL City-St-Zip: MILTON, FL 32570 City-St-Zip: MILTON, FL 32570 Title: () Delete Title: (X) Change ( ) Addition LOWRY, HUGH Name: KELLEY, DAVID Name: 6242 FOXGLOVE LANE 4252 AVENIDO DE GOLF Address: Address: City-St-Zip: MILTON, FL 32570 City-St-Zip: PACE, FL 32571 Title: () Delete Title: () Change () Addition Name: MITCHELL, JAMES Name: 5255 SPRINGDALE DR Address: Address: City-St-Zip: MILTON, FL 32570 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition THOMPSON, CALVIN ALMEIDA, PAT Name: Name: 5425 CAVARY CHURCH RD 5886 N. AIRPORT RD Address: Address: City-St-Zip: MILTON, FL 32570 City-St-Zip: MILTON, FL 32570 Title: () Delete Title: () Change () Addition PENDLETON, ROGER Name: Name: Address: 5391 DELONA RD Address: MILTON, FL 32583 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: BARBARA MARSHALL TREA 07/08/2008