

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2005 8:00 am
Secretary of State

01-06-2005 90001 044 ****70.00

DOCUMENT # 850278 1. Entity Name THE CHURCH OF GOD OF THE MOUNTAIN ASSEMBLY, INC.					
Principal Place of Business 256 N FLORENCE AVE JELICO, TN 37762 US			Mailing Address P.O. BOX 157 JELICO, TN 37762 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 62-6012946	
Zip		Country		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ELLIS, HIRAM REV. 109 LONDON AVE INTERLACHEN, FL 32148				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LYKE, LONNIE 326 OLD TRACY BRANCH RD CLAIRFIELD, TN 37715 ☒ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD PADGETT, MICHAEL L RT 3 BOX 463A MIDDLESBORO, KY 40965 ☒ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD COK, JAMES L 1100 LARKLANE CORBIN, KY 40701 ☒ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CORNELIUS, FRED R. 232 Third St. Apt. 5 JELICO, TN 37762 ☐ Change ☒ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD WALDEN, JAY 114 Walden Lane JELICO, TN 37762 ☐ Change ☒ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD KILGORE, James 170 N FLORENCE AVE JELICO, TN 37762 ☐ Change ☒ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
12. I hereby certify that the information supplied with this filing does not qualify 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 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: <u>James Kilgore</u> (JAMES KILGORE)				Jan 3, 2005 (423) 784-8260	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date Daytime Phone #	