

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006748

FILED
Mar 27, 2009
Secretary of State

Entity Name: THE BIBLE CHURCH OF GOD OF PROPHECY, INC.

Current Principal Place of Business:

4210 S. UNIVERSITY DR
DAVIE, FL 33328

New Principal Place of Business:

Current Mailing Address:

4210 S. UNIVERSITY DR
DAVIE, FL 33328

New Mailing Address:

FEI Number: 20-0002163

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, WINSTON
8730 NW 19TH STREET
PEMBROKE PINES, FL 33024 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: ED () Delete
Name: WILLIAMS, WINSTON
Address: 8730 NW 19TH STREET
City-St-Zip: PEMBROKE PINES, FL 33024

Title: ED () Delete
Name: WILLIAMS, JOYCE
Address: 8730 NW 19TH STREET
City-St-Zip: PEMBROKE PINES, FL 33024

Title: ED () Delete
Name: WILLIAMS, DESRENE
Address: 8730 NW 19TH STREET
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D () Delete
Name: MCFARLANE, MENORA
Address: 117 NW 49TH AVE
City-St-Zip: PLANTATION, FL 33317

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 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: WINSTON WILLIAMS

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03/27/2009

Electronic Signature of Signing Officer or Director

_____ Date