

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Sep 06, 2005**  
**Secretary of State**

DOCUMENT# N03000003813

Entity Name: SOUL MISSION CHURCH OF GOD IN CHRIST, INC.

**Current Principal Place of Business:**

307 N 11 ST  
PALATKA, FL 32177

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2092  
PALATKA, FL 32178

**New Mailing Address:**

FEI Number: 59-3702685      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:**

MULBERRY, ALONZO  
2113 CRILL AVE.  
PALATKA, FL 32177      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: MULBERRY, ALONZO  
Address: 2113 CRILL AVE  
City-St-Zip: PALATKA, FL 32117

Title: D      ( ) Delete  
Name: WILLIAMS, JAMES  
Address: 1511 S PALM AVE LOT 8  
City-St-Zip: PALATKA, FL 32177

Title: D      ( ) Delete  
Name: MOBLEY, ELAINE  
Address: 2464 GOLF DR  
City-St-Zip: PALATKA, FL 32177

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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: D      ( ) Change (X) Addition  
Name: MULBERRY, MARVA V  
Address: 2113 CRILL AVE  
City-St-Zip: PALATKA, FL 32177

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: ALONZO MULBERRY

D

09/06/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date