


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # N05000011268	
1. Entity Name GOD'S COMMANDMENTS FOUNDATION, INC.	

Principal Place of Business 204 37TH AVENUE NORTH #100 ST. PETERSBURG, FL 33704	Mailing Address 204 37TH AVENUE NORTH #100 ST. PETERSBURG, FL 33704
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DO NOT WRITE IN THIS SPACE

04162008 No Chg-NP CR2E037 (4/06)

4. FEI Number 20-5039035	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DE WAN, THOMAS E
 204 37TH AVENUE NORTH #100
 ST. PETERSBURG, FL 33704

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PVP DEWAN, THOMAS 204 37TH AVENUE NORTH #100 ST. PETERSBURG, FL 33704
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST NANCE, MERILYN E 204 37TH AVENUE NORTH #100 ST. PETERSBURG, FL 33704
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 05/21/08-80117-024 61.25

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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: *[Signature]* PVP 4-16-08 800206 4537

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #