


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2006 8:00 am
Secretary of State

02-15-2006 90025 033 ****61.25

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DOCUMENT # N50128					
1. Entity Name THE BELLE GLADE ALLIANCE CHURCH, INC.					
Principal Place of Business 425 E. CANAL ST., N. BELLE GLADE, FL 33430 US		Mailing Address 425 E. CANAL ST. N. P.O. BOX 624 BELLE GLADE, FL 33430 US			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		4. FEI Number 59-1522945	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WILLIAMSON, TIMOTHY D REV 212 SE 5TH STREET N BELLE GLADE, FL 33430				7. Name and Address of New Registered Agent	
				Name Rev. Timothy D Williamson III	
				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 <i>Rev. Timothy D. Williamson III</i>				DATE 2/6/06	
Filing Fee is \$61.25 Due by May 1, 2006				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D	<input type="checkbox"/> Delete			
NAME	RAYBURN, DAVID				
STREET ADDRESS	833 NE 3RD ST				
CITY-ST-ZIP	BELLE GLADE, FL 33430				
TITLE	TD	<input type="checkbox"/> Delete			
NAME	HERRING, JAMES JR				
STREET ADDRESS	808 N E 2ND STREET				
CITY-ST-ZIP	BELLE GLADE, FL 33430				
TITLE	D	<input type="checkbox"/> Delete			
NAME	GRIFFIN, JOHN				
STREET ADDRESS	9 NW AVE D				
CITY-ST-ZIP	BELLE GLADE, FL 33430				
TITLE	D	<input type="checkbox"/> Delete			
NAME	KIRCHMAN, PETER				
STREET ADDRESS	961 TABOT ROAD				
CITY-ST-ZIP	BELLE GLADE, FL 33430				
TITLE	D	<input checked="" type="checkbox"/> Delete			
NAME	OUTZ, SHARON				
STREET ADDRESS	633 SE 7TH DR				
CITY-ST-ZIP	BELLE GLADE, FL 33430				
TITLE		<input type="checkbox"/> Delete			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
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: <i>Rev. Timothy D. Williamson III</i>				DATE 2/6/06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date	
				561-9969914	
				Daytime Phone #	