

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90183 037 ****61.25

DOCUMENT # 750292

1. Entity Name

THE TRUE CHURCH OF THE LIVING GOD, INC.



Principal Place of Business

1950 N.W. 8TH STREET
POMPANO BEACH FL 33069

Mailing Address

1950 N.W. 8TH STREET
POMPANO BEACH FL 33069

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1997356

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BLUE, JOE, JR.
1104 N.W. SISTRUNK BOULEVARD
FORT LAUDERDALE FL 33311

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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 PD
NAME BLUE, ELDER JOE JR ☐ Delete
STREET ADDRESS 1108 1/2 NW SISTRUNK BLV
CITY-ST-ZIP FT LAUDERDALE, FL 00000

TITLE SD
NAME BLUE, DIANE W ☐ Delete
STREET ADDRESS 1108 1/2 NW SISTRUNK BLV
CITY-ST-ZIP FT LAUDERDALE, FL 00000

TITLE T
NAME EDWARDS, WENDY ☐ Delete
STREET ADDRESS 1971 N.W. 4 STREET
CITY-ST-ZIP POMPANO BEACH FL 33060

TITLE D
NAME FIELDS, CONNIE D. ☐ Delete
STREET ADDRESS 991 N.W. 18TH DRIVE
CITY-ST-ZIP FT LAUDERDALE, FL 00000

TITLE S
NAME SACCOCIO, EILEEN ☐ Delete
STREET ADDRESS 1021 NW 23 TERR
CITY-ST-ZIP POMPANO BEACH FL 33069

TITLE D
NAME WILLIAMS, TIMOTHY B. ☒ Delete
STREET ADDRESS 2681 NW 5 ST
CITY-ST-ZIP POMPANO Bch FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Director
NAME Lisa M. Murrell
STREET ADDRESS 801 N.W. 8 AVE.
CITY-ST-ZIP Pompano Bch. FL 33069 ☒ 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: *Diane Blue, DIANE BLUE - Director*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-04 912-338-0718
Date Daytime Phone #