

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18404

FILED  
Apr 16, 2006  
Secretary of State

**Entity Name:** MIRACLE TEMPLE CHURCH OF GOD IN CHRIST, INC.

**Current Principal Place of Business:**

POST OFFICE BOX 477  
GRETNA, FL 32332

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 477  
GRETNA, FL 32332

**New Mailing Address:**

**FEI Number:** 59-3289445

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WALKER, SHIRLEY A D  
226 EAST CIRCLE DRIVE  
GRETNA, FL 32332 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: D ( ) Delete  
Name: LEE, JESSE  
Address: P O BOX 477  
City-St-Zip: GRETNA, FL 32332

Title: D ( ) Delete  
Name: ONEAL, SEAN P  
Address: P O BOX 1015  
City-St-Zip: GRETNA, FL 32332

Title: D ( ) Delete  
Name: SHAW, TERRY  
Address: 11885 BLUE STAR HWY  
City-St-Zip: MT PLEASANT, FL

Title: D ( ) Delete  
Name: LEE, JOHN L  
Address: P O BOX 477  
City-St-Zip: GRETNA, FL 32332

Title: D ( ) Delete  
Name: LARKIN, ELAINE  
Address: P O BOX 477  
City-St-Zip: GRETNA, FL

Title: D ( ) Delete  
Name: DUBOSE, DIANE  
Address: 208 S LOWE STREET  
City-St-Zip: QUINCY, FL 32351

**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:

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 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: JOHN L. LEE

D

04/16/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date