## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N9200000052

Entity Name: SMITH CHAPEL AOH CHURCH, INC.

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

319 CONGO RD 1931 WELBY WAY STE 4 CHATTAHOOCHEE, FL 32324 TALLAHASSEE, FL 32308

Current Mailing Address: New Mailing Address:

P. O. BOX 711 1931 WELBY WAY STE 4 CHATTAHOOCHEE, FL 32324 TALLAHASSEE, FL 32308

FEI Number: 59-3152244 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

SMITH, GRANVILLE A
319 CONGO RD
CHATTAHOOCHEE, FL 32324 US
JOHNSON, ABE DR
4085 BOTHWELL TERR
TALLAHASSEE, FL 32317 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: DR ABE JOHNSON 04/28/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: PMD (X) Change ( ) Addition Name: JOHNSON, ABE JR Name: JOHNSON, ABE DR Address: 4085 BOTHWELL TERR

Address: 4085 BOTHWELL TERR Address: 4085 BOTHWELL TERR
City-St-Zip: TALLAHASSEE, FL 32317 City-St-Zip: TALLAHASSEE, FL 32317

Title: D ( ) Delete Title: VTD (X) Change ( ) Addition Name: JOHNSON, MITTIE P Name: JOHNSON, MITTIE P

Address: 4085 BOTHWELL TERR
City-St-Zip: TALLAHASSEE, FL 32317

Name: 307 INCON, MITTLE I
Address: 4085 BOTHWELL TERR
City-St-Zip: TALLAHASSEE, FL 32317

Title: PMD ( ) Delete Title: D (X) Change ( ) Addition

Name:SMITH, GRANVILLE AName:SMITH, GRANVILLE AAddress:319 CONGO RDAddress:319 CONGO RD

City-St-Zip: CHATTAHOOCHEE, FL 32324 City-St-Zip: CHATTAHOOCHEE, FL 32324

Title: VTD () Delete Title: D (X) Change () Addition

Name: SMITH, BEVERLY D Name: SMITH, BEVERLY D
Address: 319 CONGO RD
Address: 319 CONGO RD

City-St-Zip: CHATTAHOOCHEE, FL 32324 City-St-Zip: CHATTAHOOCHEE, FL 32324

Title: ( ) Delete Title: D ( ) Change (X) Addition
Name: THE CENTRAL TRUTH MI, NISTRIES, INC

 Address:
 Address:
 1931 WELBY WAY STE 4

 City-St-Zip:
 City-St-Zip:
 TALLAHASSEE, FL 32308

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: DR ABE JOHNSON PMD 04/28/2006