## 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## FILED **DOCUMENT #740642** 2007 SEP 14 AM 10: 53 ROYAL ASSEMBLY CHURCH OF THE LIVING GOD, INC. SECRETARY OF STATE Principal Place of Business Mailing Address TALLAHASSEE, FLORIDA 1964 NW SISTRUNK BLVD 532 N.W. 20TH AVE. FT. LAUDERDALE, FL 33311 FT. LAUDERDALE, FL 33311 IIS 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 09112007 CR2E037 (12/06) 4. FEI Number 59-1859105 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Ms. Birdalla Bennett GREENE, HENRY Street Address (P.O. Box Number is Not Acceptable) 7411 NW 37TH STREET FORT LAUDERDALE, FL 33319 532 N W 20th Avenue City Zip Code 33311 Fort Lauderdale 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. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to \$5.00 May Be Amended AR is \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE XX Change ■ Addition GREENE, HENRY DR NAME NAME STREET ADDRESS 7411 NW 37TH STREET STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33319 CITY-ST-ZIP TITLE ☐ Delete TITLE XX Change BENNETT BIRDALLA NAME NAME 001097169**41** 29/27--01061--003 \*\*6 STREET ADDRESS 532 NW 20TH AVENUE STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33311 CITY-ST-ZIP TITLE Delete De TITLE Change K Addition COVINGTON, TYRONE NAME NAME Graham, Alfreda STREET ADDRESS 1501 NW 11TH PLACE STREET ADDRESS 384 Utah Avenue CITY-ST-7IP FORT LAUDERDALE, FL 33311 CITY-ST-ZIP 33312 Fort Lauderdale, Fl ☑ Delete TITLE D TITLE ★ Addition □ Change NAME WISE, J.L. NAME Graham, Robert STREET ADDRESS 1800 NW 15TH AVENUE STREET ADDRESS 384 Utah Avenue FORT LAUDERDALE, FL 33311 CITY-ST-ZIP CITY-ST-7IP <u>Fort Lauderdale,</u> 33312 TITLE TITLE ☐ Delete K Addition ☐ Change NAME NAME Abner, Lucille STREET ADDRESS STREET ADDRESS 2931 N W 7th Street CITY-ST-ZIP CITY-ST-ZIP 33311 Fort Lauderdale, Fl TITLE ☐ Delete TITLE ☐ Change K Addition NAME NAME Russell, Douglas STREET ADDRESS STREET ADDRESS 4020 Inverrary Blvd. Apt #1103 CITY-ST-ZIP Lauderhill, Fl 33311 12. I hereby certify that the information supplied with this filling 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: 1

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #