

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16091

FILED
Mar 19, 2008
Secretary of State

Entity Name: FIRST ASSEMBLY OF GOD OF KEYSTONE HEIGHTS, FLORIDA, INC.

Current Principal Place of Business:

8025 S.R. 100
HIGHWAY 100
KEYSTONE HEIGHTS, FL 32656 US

New Principal Place of Business:

Current Mailing Address:

8025 S.R. 100
HIGHWAY 100
KEYSTONE HEIGHTS, FL 32656 US

New Mailing Address:

FEI Number: 59-3183534 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MAYER, DAVID R
190 SW PEACH ST.
KEYSTONE HEIGHTS, FL 32656 US

Name and Address of New Registered Agent:

MAYER, DAVID R SR
190 SW PEACH ST.
KEYSTONE HEIGHTS, FL 32656 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: REV. DAVID R. MAYER SR.

03/19/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: FIDLER, KRIS
Address: 7029 CRYSTAL LAKE RD
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: PD () Delete
Name: MAYER, DAVID
Address: 190 SW PEACH ST
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: T () Delete
Name: MUSEFSCHMIDT, GALA
Address: 6734 CIR 214
City-St-Zip: MELROSE, FL 32666

Title: SD () Delete
Name: ROSE, STEVE
Address: 105 JOHN ST
City-St-Zip: INTERLACHEN, FL 32148

Title: D () Delete
Name: HALL, TOMMIE
Address: PO BOX 1929
City-St-Zip: HAWTHORNE, FL 32640

Title: D () Delete
Name: RONQUILLE, MIKE
Address: 292 SE 46TH LOOP
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: OSTEEN, DONALD R SR
Address: 245 COUNTRY LIVING CIRCLE
City-St-Zip: MELROSE, FL 32666

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: MESSERSCHMIDT, GALA
Address: 6734 CIR 214
City-St-Zip: MELROSE, FL 32666

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 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: REV. DAVID R. MAYER SR.

PD

03/19/2008

Electronic Signature of Signing Officer or Director

Date