

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90296 006 ****61.25

DOCUMENT # 702314

1. Entity Name
RIVER OF LIFE ASSEMBLY OF GOD, INC.



Principal Place of Business
1890 NO COURTENAY PARKWAY
MERRITT ISLAND, FL 32953

Mailing Address
1890 NO COURTENAY PARKWAY
MERRITT ISLAND, FL 32953

DO NOT WRITE IN THIS SPACE



01172006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-1809108

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

BERNEY, MARK
1775 CANAL COURT
MERRITT ISLAND, FL 32953

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD BERNEY, REV. MARK 1775 CANAL COURT MERRITT ISLAND, FL 32953
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MATTES, HELEN 200 TIKI DRIVE MERRITT ISLAND, FL 32953 <i>PLEASE REMOVE DEACON VINCE BAXTER 116 OAK GROVE LANE MERRITT ISLAND, FL 32952</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HILL, RICK 5316 SAN SEBASTIAN WAY VIERRA, FL 32955
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MATTES, JIM 200 TIKI DRIVE MERRITT ISLAND, FL 32953 <i>PLEASE REMOVE DEACON GENE BLAKE 209 ADAMS AVENUE CAPE CANAVERAL, FL 32920</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER/DEACON FINNEGAN, PATRICK 4550 TANGLED AVE COCOA, FL 32926
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY/DEACON DAVID LERRET 760 SUNSET LAKES DRIVE MERRITT ISLAND, FL 32953

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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: *Mark Berney* MARK BERNEY

4/17/06

321-452-6490