## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 702763**

FILED May 06, 2008 Secretary of State

Entity Name: SOUTHSIDE ASSEMBLY OF GOD, INC. **Current Principal Place of Business: New Principal Place of Business:** 4750 CLEVELAND HEIGHTS BLVD. LAKELAND, FL 33813 **Current Mailing Address: New Mailing Address:** 4750 CLEVELAND HEIGHTS BLVD. LAKELAND, FL 33813 FEI Number: 59-1874248 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STEPHENS, PHILLIP 5941 VELVET LOOP US LAKELAND, FL 33811 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition STEPHENS, PHILLIP Name: Name: 5941 VELVET LOOP Address: Address: City-St-Zip: LAKELAND, FL 33811 City-St-Zip: Title: () Delete Title: () Change () Addition GRINSTEAD, NORMAN Name: Name: Address: 1136 PRINCE PLACE Address: City-St-Zip: LAKELAND, FL 33813 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition GABBEL, JOHN Name: RICHARDSON, JAMES Name: 3909 BENT TREE LOOP E Address: Address: 321 MORNINGSIDE DRIVE City-St-Zip: LAKELAND, FL 33813 City-St-Zip: LAKELAND, FL 33802 Title: () Delete Title: (X) Change ( ) Addition Name: PHILLIPS, JAMES Name: FAIRCLOTH, RYAN 6920 HATCHER RD 6758 HILLIS DRIVE Address: Address: City-St-Zip: LAKELAND, FL 33811 City-St-Zip: LAKELAND, FL 33813 Title: () Delete Title: (X) Change ( ) Addition WATSON, MILES KASPARIK, HENRY Name: Name: 2620 DEER RACK LN 1122 MELTON AVE / PO BOX 24911 Address: Address: City-St-Zip: LAKELAND, FL 33811 City-St-Zip: LAKELAND, FL 33802

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: NORMAN GRINSTEAD/ SECRETARY-TREASURER MR. 05/06/2008