## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 703292** 

FILED Feb 07, 2008 Secretary of State

Entity Name: FIRST ASSEMBLY OF GOD, INC. OF MELBOURNE, FLORIDA

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2068 PINE	RISTOFORO APPLE AVENU RNE, FL 32935		GARY T CRISTOFAR 2068 PINEAPPLE AV MELBOURNE, FL 32	ENUE	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	ERSON ST. RNE, FL 32935	US			
FEI Number:	: 59-2393289	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
1615 SWE	ARO, GARY T ETWOOD DR RNE, FL 32935				
	named entity se of Florida.	submits this statement for the p	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	VD () JOSEPH, JEFF 399 LAKE VICT MELBOURNE, I	ORIA DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
•	, .	L 02040	City-St-Zip.		
Title: Name: Address:		Delete T UE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address: Address: City-St-Zip:	SD ( ) LOWE, ROBER 411 3RD AVEN INDIALANTIC, F	Delete T UE EL 32903 Delete AVID LANE	Title: Name: Address:	( ) Change ( ) Addition ( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address:	SD () LOWE, ROBER 411 3RD AVEN INDIALANTIC, F TD () THOMPSON, D. 2151 SIROCO I MELBOURNE, I	Delete T UE :L 32903  Delete AVID _ANE =L 32934  Delete GARY OOD DRIVE	Title: Name: Address: City-St-Zip: Title: Name: Address:	• • • • • • • • • • • • • • • • • • • •	
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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: GARY T. CRISTOFARO SL 02/07/2008