2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

if changed, or on an attachment with an address, with all other like empowered.

SIGNATUR

FILED DOCUMENT # 705318 Apr 27, 2006 08:00 AN Secretary of State 1. Entity Name GOSPEL LIGHT BAPTIST CHURCH HOLDING COMPANY Principal Place of Business Mailing Address 3415 APALACHEE PKWY 3415 APALACHEE PKWY TALLAHASSEE FL 32311 TALLAHASSEE FL 32311 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State Applied For 4. FEI Number 59-1159322 Not Applicable Z∙p 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 NOLAN, LARRY S. Street Address (P.O. Box Number is Not Acceptable) 2524 STONEHOUSE COURT TALLAHASSEE FL 32301 City Zip Code 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 Stanature, typed or protect name of registered agent and tille if anothrable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete THE ☐ Change Addition GARGUS, GARY HAME NAME 2041 FOREST GLEN CT STREET ADDRESS STREET ADDRESS CHY-ST-ZIP TALLAHASSEE FL 32303 CITY-ST-ZIP TITLE ☐ Delete HILE U00000538252 Change Addition MCKENDREE, JAMES NAME NAME 05/03/06-80050-011 61.25 1142 WALDEN ROAD STREET ADDRESS STRECT ADDRESS TALLAHASSEE FL 32311 CHY-ST-ZIP City-St-782 TITLE ☐ Delete ☐ Change ☐ Addition NELSON, O. C. NAME NAME 7070 CARMEL DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TALLAHASSEE FL 32308 CITY-ST-7/P ETTLE ☐ Delete THE Change Change ☐ Addition MAME NOLAN, LARRY S. NAME STREET ADDRESS 2524 STONEHOUSE CT STREET ADDRESS CITY-ST-ZIP TALLAHASSEE FL 32301 CITY-ST-ZiP TITLE Delete TITLE ☐ Change ☐ Addition BOWEN, MICHAEL MAME NAME 23 BRIDLE GATE COURT STREET ADDRESS STREET ADDRESS CRAWFORDVILLE FL 32327 CITY - ST - ZIP CITY-ST-ZIP RYLE Delete THE ☐ Change Addition SWEET, NATHAN NAME NAME 2376 WINTERGREEN RD STREET ADORESS STREET ADDRESS TALLAHASSEE FL 32308 CITY - ST-ZIP CITY-SI-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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