2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 24, 2008 8:00 am **DOCUMENT # 706796** Secretary of State 1. Entity Name 03-24-2008 90045 020 ****61.25 FIRST ASSEMBLY OF GOD, INC. OF LAKE PLACID, **FLORIDA** Principal Place of Business Mailing Address POST OFFICE BOX 477 327 PLUMOSA AVENUE LAKE PLACID FL 33862 LAKE PLACID FL 33852 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 327 Plumosa Street 327 Plumosa Street Suite, Apt. #. etc. Suite, Apt. #, etc 1st MOORE CR2E037 (10/07) City & State Applied For City & State 4. FEI Number 59-2352453 Not Applicable Zip Country 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 BRYANT, JOHNNY Street Address (P.O. Box Number is Not Acceptable) 345 PLUMOSA AVE Street LAKE PLACID FL 33852 345 Plumosa Street 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 Fiorica. Lam familiar with, and accept the obligations of registered agent. Ray, Johnson Argusto, Daster Morch 5, 2008 SIGNATURE Signature, typed or printed earns of registered agent and title if amplicable. (1901) กระบบกระสายการเมื่อง การเสริม ภายะ เหมื่อสุรั FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2008 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TITLE TITLE Delete deacon BRYANT, JOHNNY (REV) NAME William Johnson 345 PLUMOSA AVENUE STREET ADDRESS STREET ADDRESS 201 Whatley Blvd. LAKE PLACID FL CITY-ST-ZIP CITY-ST-7IP Sebring, FL 33872 X Delete TITLE TITLE ☐ Change Addition | CLIFFORD, ROBERT NAME NAME 50 WINDWARD DR. STREET ADDRESS STREET ADDRESS. LAKE PLACID FL 33852 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Addition TITLE ☐ Defete ☐ Change MIXON, RALPH NAME NAME 456 HOOVER AVE. NE STREET ADDRESS STREET ADDRESS CITY - ST - ZIP LAKE PLACID FL 33852 CITY-ST-ZIP SD Delete TITLE ☐ Change ☐ Addition PENNISI, FRANK MAME NAME P.O. BOX 201 STREET ADDRESS STREET ADDRESS LAKE PLACID FL 33862 CITY-ST-ZIP CITY-ST-7IP ☐ Dalete ☐ Change Addition TITLE TITLE ROWE, RICHARD NAME NAME 185 WOODSIDE DR. STREET ADDRESS STREET AUDRESS LAKE PLACID FL 33852 CITY-ST-ZIP CITY-ST-ZIP Dalete TITLE Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZP

12. I hereby certify that the information supplied with this filling 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 if changed, or on an attachment with an address, with all other like empowered. 863-465-2363

CITY-ST-7IP

Rev. Johnny Bryant, Pastor March 5,2008

FILED