

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707451

FILED  
Apr 11, 2006  
Secretary of State

Entity Name: FULL GOSPEL ASSEMBLY, INC.

## Current Principal Place of Business:

7803 UNIVERSITY BLVD  
WINTER PARK, FL 32792

## New Principal Place of Business:

## Current Mailing Address:

7803 UNIVERSITY BLVD  
WINTER PARK, FL 32792

## New Mailing Address:

FEI Number: 58-0059307

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MONTECALVO, RICHARD L  
1460 PELICAN BAY TRAIL  
WINTER PARK, FL 32792 US

## Name and Address of New Registered Agent:

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:

Title: S ( ) Delete  
Name: BEALEFELD, SHERRI  
Address: 733 JORDAN COURT  
City-St-Zip: OVIEDO, FL 32765

Title: D ( ) Delete  
Name: BOOTH, KEITH  
Address: 573 RACHAEL CT.  
City-St-Zip: OVIEDO, FL 32765

Title: T ( ) Delete  
Name: BLANCHARD, ELLEN,  
Address: 2543 EASTBROOK BLVD  
City-St-Zip: WINTER PARK, FL 00000,

Title: D ( ) Delete  
Name: MONTECALVO, RICHARD L JR  
Address: 1221 LAKE MILLS ROAD  
City-St-Zip: CHULUOTA, FL 32766

Title: D ( ) Delete  
Name: BLACKSHAW, PETER  
Address: 14818 FAVERSHAM CIRCLE  
City-St-Zip: ORLANDO, FL 32826

Title: D ( ) Delete  
Name: RYAN, ROBERT  
Address: 273 LAKE JESSUP AVE  
City-St-Zip: OVIEDO, FL 32765

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change ( ) Addition  
Name: HALL, KIMBERLY  
Address: 3373 GOLDENROD RD. #1211  
City-St-Zip: WINTER PARK, FL 32792

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ELLEN BLANCHARD

T

04/11/2006

Electronic Signature of Signing Officer or Director

Date