

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 709463

**FILED**  
**Jan 29, 2010**  
**Secretary of State**

**Entity Name:** WESTSIDE ASSEMBLY OF GOD CHURCH, INC.

**Current Principal Place of Business:**

179 KIT DRIVE  
CRESTVIEW, FL 32536

**New Principal Place of Business:**

**Current Mailing Address:**

179 KIT DRIVE  
CRESTVIEW, FL 32536

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

METCALF, REBEKAH  
3115 EARL KENNEDY RD.  
CRESTVIEW, FL 32539 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: PC  
Name: KOLMETZ, THOMAS V  
Address: 5040 A.L. GILMAN RD.  
City-St-Zip: BAKER, FL 32531

Title: T  
Name: KOLMETZ, THOMAS V JR.  
Address: 968 B STREET  
City-St-Zip: CRESTVIEW, FL 32536

Title: T  
Name: METCALF, DONALD A  
Address: 3115 EARL KENNEDY RD.  
City-St-Zip: CRESTVIEW, FL 32539

Title: T  
Name: BUSBEE, ROSELYN  
Address: 3118 N. HWY. 85  
City-St-Zip: CRESTVIEW, FL 32531

Title: T  
Name: PEACOCK, SELMA  
Address: 1539 HESTER CHURCH RD.  
City-St-Zip: BAKER, FL 32531

Title: T  
Name: GEISSEL, WARREN  
Address: 28 JAMES DR  
City-St-Zip: SHALIMAR, FL 32579

I hereby 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 all other like empowered.

SIGNATURE: REBEKAH METCALF

SEC

01/29/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date