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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 709683

1. Corporation Name
FIRST CHURCH OF GOD, INC., TITUSVILLE, FLORIDA

Principal Place of Business	Mailing Address
77 N. CARPENTER RD. TITUSVILLE FL 32796	77 N. CARPENTER RD. TITUSVILLE FL 32796

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualifed 09/30/1965
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-1606967 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip / Country 24 / 25	Zip / Country 29 / 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

MOON, CHARLES
186 JACKSON ST
TITUSVILLE FL 32780

10. Name and Address of New Registered Agent

81 Name: Donald C. Riggle
82 Street Address (P.O. Box Number is Not Acceptable): 107 S. Singleton Ave.
83
84 City: Titusville **FL** 85 Zip Code: 32796

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	T	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	PHILIPS, JANE		1.2 NAME	
STREET ADDRESS	2515 SHADY OAKS DRIVE		1.3 STREET ADDRESS	
CITY-ST-ZIP	TITUSVILLE FL		1.4 CITY-ST-ZIP	
TITLE	TR	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	KISER, KEITH		2.2 NAME	
STREET ADDRESS	2590 US 1		2.3 STREET ADDRESS	
CITY-ST-ZIP	MIMS FL 32754		2. 4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	HOLLETT, GLEN		3.2 NAME	
STREET ADDRESS	8273 ROANNE DR		3.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32817		3.4. CITY-ST-ZIP	
TITLE	S	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	KISER, KATHIE		4. 2 NAME	
STREET ADDRESS	2590 US HWY 1		4.3 STREET ADDRESS	
CITY-ST-ZIP	MIMS FL		4.4 CITY-ST-ZIP	
TITLE	V	☐ DELETE	5.1 TITLE	☒ Change ☐ Addition
NAME	MOON, CHARLES		5.2 NAME	V
STREET ADDRESS	186 JACKSON ST		5.3 STREET ADDRESS	Donald C. Riggle
CITY-ST-ZIP	TITUSVILLE FL 32780		5.4 CITY-ST-ZIP	107 S. Singleton Ave.
TITLE	P	☒ DELETE	6.1 TITLE	Titusville, FL 32796 ☐ Change ☐ Addition
NAME	RATCLIFF, ROY		6.2 NAME	
STREET ADDRESS	2585 SHADY OAKS DRIVE		6.3 STREET ADDRESS	
CITY-ST-ZIP	TITUSVILLE FL		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Donald C. Riggle SIGNATURE REQUIRED Donald C. Riggle 3-15-99 (407) 267-2824
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)