

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724235

FILED
Feb 22, 2007
Secretary of State

Entity Name: EASTERN FLORIDA JURISDICTION, CHURCH OF GOD IN CHRIST, INC.

Current Principal Place of Business:

3120 N.W. 48TH TERR
MIAMI, FL 33142 US

New Principal Place of Business:

Current Mailing Address:

27 PALM CIRCLE
AVON PARK, FL 33825

New Mailing Address:

FEI Number: 74-8106975 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

COHEN, JACOB BISHOP
3120 NW 48TH TERRACE
MIAMI, FL 33142 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: PD () Delete
Name: COHEN, JACOB BISHOP
Address: 3120 N.W. 48TH TERR.
City-St-Zip: MIAMI, FL 33142

Title: VD () Delete
Name: BROWN, CLARENCE
Address: 560 SW 3RD ST
City-St-Zip: BELLE GLADE, FL 33430

Title: DV () Delete
Name: WILCOX, IVORY
Address: 1475 NW 37TH ST
City-St-Zip: MIAMI, FL 33142

Title: SD () Delete
Name: HULEN, JAMES L
Address: 25 PALM CIRCLE
City-St-Zip: AVON PARK, FL 33825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JACOB COHEN

P/D

02/22/2007

Electronic Signature of Signing Officer or Director

_____ Date