

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 27, 2009
Secretary of State

DOCUMENT# 727250

Entity Name: THE FIRST ASSEMBLY OF GOD OF ARCADIA INC.**Current Principal Place of Business:**201 N 11TH AVE
ARCADIA, FL 34266 US**New Principal Place of Business:****Current Mailing Address:**201 N 11TH AVE
ARCADIA, FL 34266 US**New Mailing Address:****FEI Number:** 59-1899982**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ZARLE, MICHAEL W REV
201 N 11TH AVE
ARCADIA, FL 34266 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:** PRES () Delete
Name: ZARLE, MICHAEL W REV
Address: 201 N 11TH AVENUE
City-St-Zip: ARCADIA, FL 34266**Title:** D () Delete
Name: CLAY, JAMES
Address: PO BOX 2800
City-St-Zip: ARCADIA, FL 34265**Title:** D () Delete
Name: ECKER, GEORGE
Address: PO BOX 61
City-St-Zip: ARCADIA, FL 34265**Title:** D () Delete
Name: HELEWSKI, PETER
Address: PO BOX 1849
City-St-Zip: ARCADIA, FL 34265**Title:** D () Delete
Name: WILLIAMSON, DARRELL
Address: PO BOX 751
City-St-Zip: ARCADIA, FL 34265**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** D (X) Change () Addition
Name: CLAY, JAMES
Address: P.O. BOX 2800
City-St-Zip: ARCADIA, FL 34266**Title:** D (X) Change () Addition
Name: RABURN, TERRY
Address: 1437 E. MEMORIAL AVE.
City-St-Zip: LAKELAND, FL 33801**Title:** SEC (X) Change () Addition
Name: POWELL, STEVE
Address: 1437 E. MEMORIAL AVE.
City-St-Zip: LAKELAND, FL 33801**Title:** D (X) Change () Addition
Name: YOUNG, SCOTT
Address: 1560 WENDELL KENT RD
City-St-Zip: SARASOTA, FL 34240**Title:** TRES () Change (X) Addition
Name: BLACKBURN, WAYNE
Address: 1437 E. MEMORIAL AVE.
City-St-Zip: LAKELAND, FL 33801

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL W ZARLE

PRES

07/27/2009

Electronic Signature of Signing Officer or Director

Date