

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728983

FILED
Mar 05, 2007
Secretary of State

Entity Name: THE CHURCH OF WISDOM, INC.

Current Principal Place of Business:

940 SILVER MINE ROAD
PO BOX 70
MCCAYSVILLE, GA 30555 US

New Principal Place of Business:

725 OLD SILVER MINE ROAD
MCCAYSVILLE, GA 30555 US

Current Mailing Address:

940 SILVER MINE ROAD
PO BOX 70
MCCAYSVILLE, GA 30555 US

New Mailing Address:

PO BOX 1119
MCCAYSVILLE, GA 30555 US

FEI Number: 59-6539490

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CURCIO, CHARLES P
734 CABLE BEACH LANE
NORTH PALM BEACH, FL 33408 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: CURCIO, CHARLES P
Address: P.O. BOX 1119
City-St-Zip: MC CAYSVILLE, GA 30555

Title: VSD () Delete
Name: CURCIO, KIMBERLY P
Address: P.O. BOX 1119
City-St-Zip: MC CAYSVILLE, GA 30555

Title: TD () Delete
Name: HAYES, KELLY,
Address: P.O. BOX 489 N/A
City-St-Zip: MCCAYSVILLE, GA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CURCIO, CHARLES P
Address: 207 DELPHI HILLS LANE
City-St-Zip: MC CAYSVILLE, GA 30555

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

Title: TD (X) Change () Addition
Name: HAYES, KELLY,
Address: P.O. BOX 489
City-St-Zip: MCCAYSVILLE, GA

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: CHARLES P CURCIO

PRES

03/05/2007

Electronic Signature of Signing Officer or Director

_____ Date