2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2006
Secretary of State

DOCUMENT# 730578

Entity Name: FIRST ASSEMBLY OF GOD OF CRESTVIEW, INC.

Current Principal Place of Business:

400 S FERDON BLVD.
CRESTVIEW, FL 32536

New Principal Place of Business:

Current Mailing Address:

400 S FERDON BLVD.
CRESTVIEW, FL 32536

New Mailing Address:

FEI Number: 58-1025970 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BARROW, KATHLYN
400 S. FERDON BLVD.
CRESTVIEW, FL 32536 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:	D	( ) Delete
Name:	CADENHEAD, JERRY P	
Address:	6187 WILKINSON DR	
City-St-Zip:	CRESTVIEW, FL 32539	
Title:	T	( ) Delete
Name:	BARROW, KATHLYN S	
Address:	513 KREST DR.	
City-St-Zip:	CRESTVIEW, FL 32536	
Title:	O	( ) Delete
Name:	ENGLISH, MARK A	
Address:	400 S. FERDON BLVD.	
City-St-Zip:	CRESTVIEW, FL 32536	
Title:	S	( ) Delete
Name:	ERSKINE, ALEXANDER	
Address:	PO BOX 1126	
City-St-Zip:	CRESTVIEW, FL 32536	
Title:	D	( ) Delete
Name:	HOLLOWAY, LAMAR	
Address:	1580 HESTER CHURCH RD	
City-St-Zip:	BAKER, FL 32531	
Title:	D	( ) Delete
Name:	HOLCOMB, JASON	
Address:	6116 EVERGREEN PKWY	
City-St-Zip:	CRESTVIEW, FL 32539	

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:	
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: KATHLYN S BARROW T 01/24/2006

Electronic Signature of Signing Officer or Director — Date