

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730987

FILED  
Feb 07, 2012  
Secretary of State

**Entity Name:** FLORIDA'S FIRST ASSEMBLY OF GOD, INC.

**Current Principal Place of Business:**

1397 S. FLORIDA AVE.  
WAUCHULA, FL 33873

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1658  
WAUCHULA, FL 33873

**New Mailing Address:**

**FEI Number:** 59-2235788

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

FOWLER, JEFF  
1397 S. FLORIDA AVE  
WAUCHULA, FL 33873 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  
Name: ROGERS, DUDLEY  
Address: 1616 JOHNS ROAD  
City-St-Zip: WAUCHULA, FL 33873 US

Title: D  
Name: GRACE, KENNY  
Address: 3964 SUNSET DRIVE  
City-St-Zip: ZOLFO SPRINGS, FL 33890 US

Title: D  
Name: ALBRITTON, RALTON JR.  
Address: 412 N. 7TH AVENUE  
City-St-Zip: WAUCHULA, FL 33873 US

Title: D  
Name: CHAPA, DAVID  
Address: 2705 STEVE ROBERTS SPECIAL  
City-St-Zip: ZOLFO SPRINGS, FL 33890 US

Title: D  
Name: EAGERTON, RICK  
Address: 216 PARK DR  
City-St-Zip: WAUCHULA, FL 33873 US

Title: D  
Name: CREWS, RANDY  
Address: 2515 BESSIE ROAD  
City-St-Zip: WAUCHULA, FL 33873 US

I hereby 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 all other like empowered.

SIGNATURE: JEFF FOWLER

RA

02/07/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date