

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733773

FILED
May 24, 2005
Secretary of State

Entity Name: FIRST ASSEMBLY OF GOD, INC., OF DUNDEE, FLORIDA

Current Principal Place of Business:

106 1ST ST
PO BOX 1687
DUNDEE, FL 33838 US

New Principal Place of Business:

Current Mailing Address:

POB 1687
PO BOX 1687
DUNDEE, FL 33838 US

New Mailing Address:

FEI Number: 59-2903939 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

REVELL, DAVID M
1200 BURLINGTON COURT
AUBURNDAL, FL 33823 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: REVELL, DAVID M
Address: 1200 BURLINGTON CT
City-St-Zip: AUBURNDAL, FL 33823

Title: ED () Delete
Name: BLOOMQUIST, FLOYD
Address: 2471 WINTERSET RD
City-St-Zip: WINTER HAVEN, FL 33884

Title: T () Delete
Name: POURROY, CHRISTINA
Address: 7148 PEBBLE PASS LOOP
City-St-Zip: LAKEALAND, FL 33809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ED (X) Change () Addition
Name: BORIELAL, THEMAL
Address: 704 ADAMS AVENUE
City-St-Zip: DUNDEE, FL 33838

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 Section 119.07(3)(i), 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: DAVID M. REVELL

D

05/24/2005

Electronic Signature of Signing Officer or Director

Date