

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 30, 2006
Secretary of State**

DOCUMENT# 734845

Entity Name: GOOD NEWS BAPTIST CHURCH OF ORLANDO, INC.

Current Principal Place of Business:

4900 DONOVAN STREET .
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

4900 DONOVAN STREET .
ORLANDO, FL 32808

New Mailing Address:

FEI Number: 59-1883728 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BACON, LARRY
5320 GREENVELVET COURT
ORLANDO, FL 32808 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: T () Delete
Name: HIERS, CHARLIE S
Address: 4827 VAUGHN AVE
City-St-Zip: ORLANDO, FL 32806

Title: D () Delete
Name: BACON, LARRY
Address: 5320 GREENVELVET CT
City-St-Zip: ORLANDO, FL

Title: T () Delete
Name: CADLE, GENE
Address: 1717 CLARCONA-OCOEE ROAD
City-St-Zip: OCOEE, FL 34761

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:

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: LARRY BACON

D

04/30/2006

Electronic Signature of Signing Officer or Director

_____ Date