2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738933

FILED Jan 11, 2006 Secretary of State

Entity Name: PINE FOREST ASSEMBLY OF GOD CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 3125 NORTH PINE FOREST ROAD 3125 NORTH PINE FOREST ROAD 3125 PINE FOREST RD CANTONMENT, FL 32533 CANTONMENT, FL 32533 **New Mailing Address: Current Mailing Address:** 3125 NORTH PINE FOREST ROAD 3125 NORTH PINE FOREST ROAD 3125 PINE FOREST RD CANTONMENT, FL 32533 CANTONMENT, FL 32533 FEI Number: 59-3128255 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HUDSON, FRANKLIN E HUDSON, FRANKLIN E 3125 PINÉ FOREST RD 3125 NORTH PINE FOREST RD CANTONMENT, FL 32533 US CANTONMENT, FL 32533 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: REV. FRANKLIN E. HUDSON 01/11/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: TTS () Delete () Change () Addition WILKINS, RANDY Name: Name: 3125 N PINE FOREST RD Address: Address: City-St-Zip: CANTONMENT, FL 32533 City-St-Zip: Title: Title: () Delete () Change () Addition HUDSON, FRANKLIN E., Name: Name: Address: 3125 PINE FOREST RD Address: City-St-Zip: CANTONMENT, FL City-St-Zip: Title: () Delete Title: () Change () Addition LAMBERT, GEORGE Name: Name: Address: 1601 CRYSTAL DR Address: City-St-Zip: CANTONMENT, FL 32533 City-St-Zip: Title: TR () Delete Title: () Change () Addition MURCKO, RANDY Name: Name: Address: 7561 GUNTER RD Address: City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: Title: () Delete Title: () Change () Addition ELLSWORTH, FRANK Name: Name: 5921 ROBLE LOMA DR Address: Address: City-St-Zip: PENSACOLA, FL 32526 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: RANDY WILKINS TTS 01/11/2006