2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#741650

FILED Mar 16, 2007 Secretary of State

Entity Name: OCEANWAY ASSEMBLY OF GOD, INC.

Current Principal Place of Business: 12240 SAGO AVENUE WEST P O BOX 26278 JACKSONVILLE, FL 322263278 Current Mailing Address: 12240 SAGO AVENUE WEST P O BOX 26278 JACKSONVILLE, FL 322263278			New Principa	New Principal Place of Business: 12240 SAGO AVENUE WEST JACKSONVILLE, FL 322263278 New Mailing Address: 12240 SAGO AVENUE WEST JACKSONVILLE, FL 322263278	
			New Mailing		
FEI Number	: 59-2247905	FEI Number Applied For ()	FEI Number Not Applica	ble () Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and A	ddress of New Registered Agent:	
JACKSON The above	TY MARSH DF IVILLE, FL 32	226 US	purpose of changing its ı	registered office or registered agent, or both,	
SIGNATUI					
	Electro	nic Signature of Registered Ag	jent	Date	
OFFICER	S AND DIREC	CTORS:	ADDITIONS/	CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D (KEELING, DU 4749 STRATT CALLAHAN, F	ON RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD (BAGGETT, DA 1721 CEDAR JACKSONVILI	BAY RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S (MYERS, JOHI 86135 FIELDS YULEE, FL 3	STONE DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	STALLWOOD 11743 MARTH	IA'S VINYARD CT	Title: Name: Address: City-St-Zip:	() Change () Addition	
City-St-Zip:	JACKSONVIL	L, I L 32223			
City-St-Zip: Title: Name: Address: City-St-Zip:) Delete	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: DANIEL R. BAGGETT PD 03/16/2007