

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746298

FILED  
Apr 11, 2006  
Secretary of State

**Entity Name:** CENTRAL ASSEMBLY OF GOD OF AUBURNDALE, INC.

**Current Principal Place of Business:**

601 LEMON ST.  
P.O. BOX 668  
AUBURNDALE, FL 33823

**New Principal Place of Business:**

**Current Mailing Address:**

601 LEMON ST.  
P.O. BOX 668  
AUBURNDALE, FL 33823

**New Mailing Address:**

**FEI Number:** 59-1859744

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DONAHUE, JOHN P  
156 ABUNDANT LIFE DRIVE  
AUBURNDALE, 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: T ( ) Delete  
Name: HOBBS, B T  
Address: 495 ARNESON AVE  
City-St-Zip: AUBURNDALE, FL 33823

Title: D (X) Delete  
Name: GILMORE, EARL J  
Address: 1206 SUSAN LANE  
City-St-Zip: AUBURNDALE, FL 33823

Title: S ( ) Delete  
Name: DONAHUE, PATRICIA D  
Address: 156 ABUNDANT LIFE DR  
City-St-Zip: AUBURNDALE, FL 33823

Title: D ( ) Delete  
Name: SMITH, RAY  
Address: 1207 BURLINGTON COURT  
City-St-Zip: AUBURNDALE, FL 33823

Title: D ( ) Delete  
Name: ALBRITTON, ORAIN  
Address: 455 PLYMOUTH RD  
City-St-Zip: AUBURNDALE, FL 33823

Title: P ( ) Delete  
Name: DONAHUE, JOHN P  
Address: 156 ABUNDANT LIFE DRIVE  
City-St-Zip: AUBURNDALE, FL 33823

**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:

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: MIKE DONAHUE

MR

04/11/2006

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

\_\_\_\_\_  
Date