

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90234 010 ****65.25

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1. Entity Name

**ROSA LEE SINGLETON EVANGELISTIC ASSOCIATION,
INCORPORATION**



Principal Place of Business

P O BOX 1881
115 AZALEA CIRCLE
PALATKA FL 32178

Mailing Address

P O BOX 1881
PALATKA FL 32178



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SINGLETON, ROSA L.
115 AZALEA CIR
PALATKA FL 32177**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME SINGLETON, REV. ROSA L. DD ☐ Delete
STREET ADDRESS 115 AZALEA
CITY- ST- ZIP PALATKA FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE VD
NAME SINGLETON, CEDRIC H. ☐ Delete
STREET ADDRESS 7608 S SANIBEL CIR
CITY- ST- ZIP TAMPA FL 33637

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE TD
NAME MONROE, JOSEPH T. ☐ Delete
STREET ADDRESS 17911 SIMMS RD
CITY- ST- ZIP ODESSA FL 33556

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

*Rev Rosa L Singleton Director April 4/06/3
Rev ROSA L SINGLETON
361 640 580*

12. I hereby certify indicated on 1 of the corporate if changed, or

SIGNATURE

Rosa L Singleton