2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748999

FILED Jul 06, 2007 Secretary of State

Entity Name: TEMPLE BEAUTIFUL CHURCH OF INDIANTOWN, INC. **Current Principal Place of Business: New Principal Place of Business:** C/O ROSA BROWN 4304 BROOK AVE. WEST PALM BEACH, FL 33407 **New Mailing Address: Current Mailing Address:** C/O ROSA BROWN 4304 BROOK AVE. WEST PALM BEACH, FL 33407 FFI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BROWN, ROSA M BROWN, ROSA M 14629 SW MLK JR. DR P.O. BOX 1324 14629 SW MLK JR. DR US INDIANTOWN, FL 34956 INDIANTOWN, FL 34956 US 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: ROSA M BROWN 07/06/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HOOD, HENRY, Name: Name: Address: 18900 N.W. 31ST AVENUE Address: City-St-Zip: MIAMI, FL City-St-Zip: Title: Title: () Delete () Change () Addition Name: CASH, ANNIE L, Name: Address: 907 E 9TH ST Address: City-St-Zip: STUART, FL 00000. City-St-Zip: Title: () Delete Title: () Change () Addition BROWN, ROSA, Name: Name: 4304 BROOKS AVE Address: Address: City-St-Zip: W PALM BEACH, FL 00000. City-St-Zip: Title: () Delete Title: () Change () Addition DOWLING, BARBARA, Name: Name: Address: P. O. BOX 1051 N/A Address: City-St-Zip: INDIANTOWN, FL 0, City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ROSA MAE BROWN SD 07/06/2007