


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # 753723
 1. Entity Name
TRUE VINE CHURCH OF JESUS CHRIST, INC.



Principal Place of Business Mailing Address
778 NW 95 TERRACE **2110 NW 193 TER**
MIAMI, FL 33150 US **MIAMI, FL 33056**

DO NOT WRITE IN THIS SPACE



02052006 No Chg-NP CR2E037 (11/05)

4. FEI Number Applied For
59-2186349 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
FULMORE, CORDELIA
2110 N.W. 193 TER
MIAMI, FL 33056

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

00000046512?
 03/22/06 00024-013 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD CAULEY, (ELDER) ROBERT L 2850 N.W. 160TH STREET OPA LOCKA, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD BRATHWAITE, BARBARA 6736 PETUNIA DR. MIRAMAR, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD FULMORE, CORDELIA 2110 NW 193 TERR OPA LOCKA, FL 33056
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert Cauley PD Date: Feb 27 2006 Daytime Phone #: 305-6217819
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR