

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755053

FILED
Apr 23, 2006
Secretary of State

Entity Name: THE CHURCH OF INNER GUIDANCE, INC.

Current Principal Place of Business:

200 OCEAN LANE DRIVE, #104
KEY BISCAYNE, FL 33149 US

New Principal Place of Business:

Current Mailing Address:

200 OCEAN LANE DRIVE, #104
KEY BISCAYNE, FL 33149 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ROBINSON, MARIUS A
200 OCEAN LANE DR
SUITE 104
KEY BISCAYNE, FL 33149 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: D () Delete
Name: KURTZ, RON
Address: 2543 PIONEER RD
City-St-Zip: TALANT, OR

Title: PTD () Delete
Name: ROBINSON, MARIUS A,
Address: 200 OCEAN LANE DRIVE, #104
City-St-Zip: KEY BISCAYNE, FL 33149

Title: VD () Delete
Name: HARRIS, RACHEL,
Address: 4 SKYFIELD DRVIE
City-St-Zip: PRINCETON, NJ

Title: D () Delete
Name: FORMAN, ROBERT
Address: 385 BROAD WAY
City-St-Zip: HASTINGS ON HUDSON, NY 10706

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:

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: MARIUS A. ROBINSON

PTD

04/23/2006

Electronic Signature of Signing Officer or Director

Date