2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2005
Secretary of State

DOCUMENT# 758677

Entity Name: "ROSA DE SARON" ASSEMBLY OF GOD, INC.

Current Principal Place of Business:

13235 PALM BCH. BLVD.
FT. MYERS, FL 33905 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 50204
FT. MYERS, FL 33905 US

New Mailing Address:

FEI Number: 65-0015592 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FELICIANO, JIMIRO
13843 MATANZAS DRIVE
FT. MYERS, FL 33905 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:	PD	( ) Delete
Name:	FELICIANO, JIMIRO	
Address:	13843 MATANZAS DR.	
City-St-Zip:	FT. MYERS, FL	
Title:	VP	( ) Delete
Name:	FELICIANO, REV LUCY	
Address:	13843 MATANZAS DR	
City-St-Zip:	FT MYERS, FL 33905	
Title:	S	( ) Delete
Name:	RIVERA, DORIS R	
Address:	2238 CALADIUM RD.	
City-St-Zip:	FORT MYERS, FL 33905	
Title:	TD	( ) Delete
Name:	COLON, ZORAIDA	
Address:	603 MARVIN AVE N	
City-St-Zip:	LEHIGH ACRES, FL 33971	
Title:	D	( ) Delete
Name:	COMELLAS, REV ELGA	
Address:	13833 THIRD STREET	
City-St-Zip:	FT MYERS, FL 33905	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP	(X) Change ( ) Addition
Name:	FELICIANO, LUCY REV	
Address:	13843 MATANZAS DR	
City-St-Zip:	FT MYERS, FL 33905	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	TD	(X) Change ( ) Addition
Name:	VELEZ, ZORAIDA	
Address:	821 ABRAMS BLVD.	
City-St-Zip:	LEHIGH ACRES, FL 33971	
Title:	D	(X) Change ( ) Addition
Name:	COMELLAS, ELGA REV	
Address:	13833 THIRD STREET	
City-St-Zip:	FT MYERS, FL 33905	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JIMIRO FELICIANO PD 01/27/2005

Electronic Signature of Signing Officer or Director — Date