2005 NOT-FOR-PROFIT CORPORATION.

FILED ANNUAL REPORT Feb 14, 2005. 08:00 AM **DOCUMENT #762662** Secretary of State CLAIR-MEL CITY FIRST ASSEMBLY OF GOD, INC. Principal Place of Business Mailing Address % REV. JOHN M. RABURN % REV. JOHN M. RABURN 2415 SOUTH 78TH STREET 2415 SOUTH 78TH STREET TAMPA, FL 33619 TAMPA, FL 33619 01212005 No Chg-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2235168 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RABURN, REV. JOHN M. DO NOT WRITE 2415 SOUTH 78TH STREET TAMPA, FL 33619 IN THIS SPACE 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 agistered agent. 200*5* raru (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Added to Fees Due by May 1, 2005 OFFICERS AND DIRECTORS 10. D TITLE NAME KELLEY, RANDY STREET ADDRESS 1217 E. LAMBRIGHT ST. U000000229935 CITY-ST-ZIP TAMPA, FL 33604 02/15/05-80022-005 61.25 TITLE P RABURN, JOHN M NAME STREET ADDRESS 6612 IKE SMITH ROAD CITY-ST-ZIP PLANT CITY, FL 33566 TITLE D NAME GREENFIELD, RON STREET ADDRESS 6550 GRACE SWEAT RD DO NOT WRITE CITY-ST-ZIP RIVERVIEW, FL 33569 IN THIS SPACE Đ CARTER, ALAN NAME STREET ADDRESS 1007 ROBINSON RD CITY-ST-ZIP PLANT CITY, FL 33567 TITLE

12. I hereby certify that the information supplied with this filing does not qualify 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 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

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP

912005