## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 848201** 

FILED Jan 10, 2006 Secretary of State

Entity Name: GULF STATES CONFERENCE ASSOCIATION OF SEVENTH-DAY ADVENTISTS, INCORPORATED

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
P.O. BOX	ANTA HIGHWAY 240249 MERY, AL 3612				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P.O. BOX	ANTA HIGHWAY 240249 MERY, AL 3612				
El Number	: 64-6001060	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of Cu	rrent Registered Agent:	Name and Address	of New Registered Agent:	
355 N. WY	N, MR. FRANK YMORE ROAD PARK, FL 32789	) US			
	e named entity su e of Florida.	ıbmits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATU					
	Electronic	Signature of Registered Age	ent	Date	
OFFICER	S AND DIRECT	ORS:	ADDITIONS/CHANG	SES TO OFFICERS AND DIRECTORS	
Fitle: Name: Address: Dity-St-Zip:	T () E MILLBURN, DENI 5721 JACKSON I WETUMPKA, AL	RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
ītle:	P ()[	Delete	Title:	( ) Change ( ) Addition	
lame: Address: City-St-Zip:	EISELE, MELVIN 3363 MARLER R PIKE ROAD, AL	D	Name: Address: City-St-Zip:		
oddress: Dity-St-Zip: Title: Jame: oddress:	3363 MARLER R PIKE ROAD, AL	D 36064 Delete 521	Address:	()Change ()Addition	
\ddress:	3363 MARLER R PIKE ROAD, AL  D () E KING, ED 257 COUNTY RD HANCEVILLE, AL	D 36064 Delete 521 35077 Delete CIR	Address: City-St-Zip: Title: Name: Address:	( ) Change ( ) Addition ( ) Change ( ) Addition	
Address: Dity-St-Zip: Title: Jame: Joity-St-Zip: Title: Jame: Jame: Jame: Jame: Jame: Jame:	3363 MARLER R PIKE ROAD, AL  D () E KING, ED 257 COUNTY RD HANCEVILLE, AL  S () E RIMER, FRED 185 CHUBBEHAT WETUMPKA, AL	D 36064 Delete 521 35077 Delete CIR 36093 Delete	Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:		

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: DENNIS S MILLBURN MR 01/10/2006