

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 10, 2008 8:00 am
Secretary of State

04-10-2008 90030 035 ****61.25



DOCUMENT # F95000002418
 1. Entity Name
FIRST CHURCH OF GOD OF THE SEVENTH DAY, INC.

Principal Place of Business Mailing Address
 PO BOX 3377 PO BOX 3377
 WEST CHESTER PA 19381 WEST CHESTER PA 19381



2. Principal Place of Business - No P.O. Box # 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

1st MOORE CR2E037 (10/07)

City & State City & State

4. FEI Number **23-0976240** Applied For
 Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent
 RIVERA, JOSE
 2227 W ROBLE DR.
 LOT 384
 KISSIMMEE FL 34746

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 authorized agent and title, if applicable. (NOTE: Registered Agent signature required when registering)

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD GONZALEZ, HORACLO 7003 SHAWNEE RD MILFORD DE 19963	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	SD RIVERA, ONIX 18 JANE ST PATERSON NJ 07522	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	TD NIEVÉS, ANGEL J 528 SOUTH WALNUT ST WEST CHESTER PA 19381	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	V ROSADO, WILFREDO JR 4608 MCKINLEY ST PHILADELPHIA PA 19135	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY- ST- ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	Vice-President Jorge L. Colon 13304 Beaverdam Rd. Ellendale, De. 19941	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Angel J. Nieves (Angel J. Nieves) 3/26/08 (610-429-9564)*