

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000003259

FILED
Mar 25, 2009
Secretary of State

Entity Name: UNITED CHURCH OF GOD, AN INTERNATIONAL ASSOCIATION, INCORPORATED

Current Principal Place of Business:

555 TECHNECENTER DRIVE
MILFORD, OH 451502755 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 541069
CINCINNATI, OH 452541069

New Mailing Address:

FEI Number: 95-4529758

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RHODES, HAROLD
3878 BAY WIND DR.
GULF BREEZE, FL 32561 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: KILOUGH, CLYDE
Address: 555 TECHNECENTER DR
City-St-Zip: MILFORD, OH 451502755

Title: S () Delete
Name: JOHNSON, DAVID M
Address: 555 TECHNECENTER DR
City-St-Zip: MILFORD, OH 451502755

Title: CD () Delete
Name: DICK, ROBERT
Address: 2700 NW 142ND CIR
City-St-Zip: VANCOUVER, WA 98685

Title: D () Delete
Name: KUBIK, VICTOR
Address: 3707 TURFWAY CT
City-St-Zip: INDIANAPOLIS, IN 46228

Title: D () Delete
Name: FRANKS, JIM
Address: 555 TECHNECENTER DR
City-St-Zip: MILFORD, OH 45150

Title: T () Delete
Name: KIRKPATRICK, THOMAS L
Address: 555 TECHNECENTER DR
City-St-Zip: MILFORD, OH 451502755

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: LOVELADY, JASON
Address: 555 TECHNECENTER DR
City-St-Zip: MILFORD, OH 451502755

I hereby certify that the information supplied with this filing does not qualify 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: DAVID M. JOHNSON

S

03/25/2009

Electronic Signature of Signing Officer or Director

Date