

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N00000002787

1. Entity Name
THE A.D. 33, CHURCH OF GOD CORPORATION



FILED

06 JAN -4 PM 3:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1108 RICHVIEW RD
TALLAHASSEE, FL 32301

Mailing Address
1108 RICHVIEW RD
TALLAHASSEE, FL 32301



01042006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3642957	Applied For Not Applicable
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5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FRANCE BURNS, ESTHER
1108 RICHVIEW RD
TALLAHASSEE, FL 32301

DO NOT WRITE 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 registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2006**

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

300063984883
01/18/06--01079--025 **70.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FRANCE BURNS, ESTHER 1108 RICHVIEW RD TALLAHASSEE, FL 32301
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BURNS SLATON, JOHNNIE M 1108 RICHVIEW RD TALLAHASSEE, FL 32301
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST SLATON, GREGORY JOHN 1108 RICHVIEW RD TALLAHASSEE, FL 32301
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Esther France Burns
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 4, 2006
Date

Daytime Phone # _____