

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

09-12-2005 90003 043 ****61.00

FILED N00000005551

2005 OCT - 10 AM 8: 39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2nd MOORE CR2E037 (5/05)

DOCUMENT # N00000005551					
1. Entity Name CHURCH OF THE OPEN DOOR, INC.					
Principal Place of Business 1503 BELMONT LANE N. LAUDERDALE FL 33068			Mailing Address 1503 BELMONT LANE N. LAUDERDALE FL 33068		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-1031527	
Zip	Country	Zip	Country	Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MACHADO, JOHN 1503 BELMONT LANE N. LAUDERDALE FL 33068			7. Name and Address of New Registered Agent		
Name			Name		
Street Address (P.O. Box Number is Not Acceptable)			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				09-07-05	
Signature, typed or printed name of registered agent and title if applicable		(N.C.E. Registered Agent signature required when re-registering)		DATE	
FILE NOW: FEE IS \$61.25 Due By September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	MACHADO, JOHN	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1503 BELMONT LANE		NAME		
STREET ADDRESS	N. LAUDERDALE FL 33068		STREET ADDRESS		
CITY-ST-ZIP	D		CITY-ST-ZIP		
TITLE	HERON, SEYMOUR	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1917 N. W. 46 AVE APT. F		NAME		
STREET ADDRESS	LAUDERHILL FL 33313		STREET ADDRESS		
CITY-ST-ZIP	SD		CITY-ST-ZIP		
TITLE	QUINCE, JERZELL	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	231 N.E. 40 CT		NAME		
STREET ADDRESS	OAKLAND PARK FL 33334		STREET ADDRESS		
CITY-ST-ZIP	D		CITY-ST-ZIP		
TITLE	THOMPSON, WINNEFRED	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2671 N.W. 116 TERR		NAME		
STREET ADDRESS	CORAL SPRINGS FL 33065		STREET ADDRESS		
CITY-ST-ZIP	VP		CITY-ST-ZIP		
TITLE	MACHADO, GAYLE	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1503 BELMONT LANE		NAME		
STREET ADDRESS	N. LAUDERDALE FL 33068		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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: See line 8