

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005674

FILED  
Apr 06, 2010  
Secretary of State

**Entity Name:** MIRACLE OF GOD FAITH HEALING GOSPEL CHURCH INC.

**Current Principal Place of Business:**

1420 W. WATERS AVE, SUITE 105  
TAMPA, FL 33604

**New Principal Place of Business:**

**Current Mailing Address:**

4119 POPLAR AVENUE  
#102  
TAMPA, FL 33603

**New Mailing Address:**

3450 PALENCIA DRIVE  
#211  
TAMPA, FL 33618

**FEI Number:** 59-3676195

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GRAHAM, VERMELL  
1111 E. WILLOW PINE CT.  
TAMPA, FL 33604 US

**Name and Address of New Registered Agent:**

GRAHAM, VERMELL  
3450 PALENCIA DRIVE  
APT #211  
TAMPA, FL 33618 US

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:**

04/06/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** BYRD, LEROY  
**Address:** 8218 NORTH FLORIDA , #31  
**City-St-Zip:** TAMPA, FL 33604

**Title:** D  
**Name:** GRAHAM, VERMELL  
**Address:** 3450 PALENCIA DRIVE, APT #211  
**City-St-Zip:** TAMPA, FL 33618

**Title:** D  
**Name:** SCOTT, SHARON  
**Address:** 1111 E. WILLOW PINE CT.  
**City-St-Zip:** TAMPA, FL 33604

I hereby 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 all other like empowered.

**SIGNATURE:** VERMELL GRAHAM

DIR

04/06/2010

Electronic Signature of Signing Officer or Director

Date