


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2004 08:00 AM
Secretary of State

DOCUMENT # N0100000018

1. Entity Name
THE GENERAL CONFERENCE OF THE CHURCH OF GOD OF THE FIRST BORN, INC.



Principal Place of Business 720 S. KANSAS AVE. NEWTON, KS 67114	Mailing Address PO BOX 1041 NEWTON, KS 67114
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01212004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 48-1072777	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

**CORONADO, ADOLFO
 148 S. MADISON AVE.
 CENTER HILL, FL 33514**

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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 _____ (NOTE: Registered Agent signature required when reinstating)

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

**Filing Fee is \$61.25
 Due by May 1, 2004**


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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ETTERMAN, JAMES A SR PO BOX 1041 NEWTON, KS 671141041
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BRYANT, JERRY 1908 S BONN WICHITA, KS 67213
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LOPEZ, PAUL PO BOX 155 TULIA, TX 79088
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MEYER, WILLIAM D 714 WEST HAVEN DRIVE NEWTON, KS 67114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD MINOR, ERNEST 200 S HEAD BELTON, TX 76513
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000013304
 01/26/04-80049-003 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  **1/22/04**

SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #