## 2006 NOT-FOR-PROFIT CORPORATION

## **ANNUAL REPORT**

DOCUMENT # N01000000531



FILED Apr 24, 2006 8:00 am Secretary of State

1. Entity Nam VILLAGE	CHURC	H OF GOD, INC.					)	04-24-2006	90409 (	)23 ****6	1.25	
6 COLEMAN RD 6 C			6 COLE	Mailing Address 6 COLEMAN RD WINTER HAVEN, FL 33880			I IFRISIPI dil A	âi îi 1 îi	FIEL MONTO MENTESS MO	<b>878) 87788</b> 41181 111	ITROL DI COM	
Principal Place of Business     3. Mailing Address					<del> </del>							
Suite, Apt. #, etc.			Sulte	Suite, Apt. #, etc.			04182006	Chg-NP	CR2E0	37 (11/05)		
City & State			City (	City & State			4. FEI Number Applied For 59-2002720 Not Applicable					
Zip	Country				Cou	untry	Fee F			\$8.75 Add Fee Require		
	6. Name	and Address of Current	Registered	Agent		7. Name and Address of New Registered Agent Name						
WHIDDEN, ALTON 6 COLEMAN RD WINTER HAVEN, FL 33880						Street Address (P.O. Box Number is Not Acceptable)						
						***		· · · · · · · · · · · · · · · · · · ·				
						City			FL	Zip Cod	e	
	named entity tions of registe	y submits this statement for ered agent.	ar the purpos	e of changing its r	egister	ed office or registe	ered agent, or both	, in the State of Fl	orida. Iam	familiar with,	and accept	
SIGNATURE .		or printed name of registered agent	and title if enging	the (NEXTE	<b>.</b>							
	ograda, typeo			. (1401).	Hegistere	u Ageni signature require	ed when reinstating)		DATE			
· - \	Filing Fe	e is \$61.25 lay 1, 2006		9. Election Camp	paign F	inancing	\$5.00 May Be Added to Fees		lake chec	k payable to		
10.	Filing Fe	e is \$61.25		9. Election Camp	paign F	inancing	\$5.00 May Be	Flo	lake chec rida Depar	tment of S	ate	
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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:

NAME OF BUCHBUG OFFICER OR DIRECTOR

4/18/06 (863) 293-0782