2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N01000000703 1. Entity Name FULL GOSPEL PHILADELPHIA CHURCH OF FLORIDA, INC.					O6 AUG 14 PM 1: 13			
		Mailing Address 801 GAVERNIE CT CRESTVIEW, FL 32539	NIE CT					
Principal Place of Business 3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		Chg-NP	g-NP CR2E037 (4/06)		
City & State		City & State		4. FEI Num 56-02		├	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificat	e of Status Desired	□ \$8.75 A Fee Requi		
6. Name and Address of Current Registered Agent Name				7. Name ar	7. Name and Address of New Registered Agent			
WELTON & WILLIAMSON LLC 1020 FERDON BLVD S				Street Address (P.O. Box Number is Not Acceptable)				
CRESTVIEW, FL 32536								
·			City			FL Zip Ci		
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 en	d title if applicable. (NOTE:	Registered Agent signatu	re required when reinstating)		DATE	 _	
Amended AR is \$61.25 9. Election Campaign Financing Trust Fund Contribution.					50	ake check payable da Department of		
10.	OFFICERS AND DIRE	CTORS	11.		HANGES TO OFFICE			
TITLE NAME	D HAN, OK SOON	Delete	TITLE NAME	Dir. / Pres		Chang	e 🔲 Addition	
STREET ADDRESS	P.O. BOX 2062 STR		STREET ADDRESS		vernie C7			
CITY-ST-ZIP	CRESTVIEW, FL 32536	ra .	CITY-ST-ZIP	C'KESTY 1C.	w, FL 32			
TITLE NAME	D FRANKLIN, BILL	Delete	title Name		7000781	Chang 7 1 ≘ 1 = 7		
STREET ADDRESS CITY-ST-ZIP	1299 EAST JAMES LEE BLVD. STR CRESTVIEW, FL 32539 CID			09/	16/0601018	011 **61	.25	
тпте	D	☐ Delete	TITLE	Dir. / Scc	24	Chang	e Addition	
NAME STREET ADDRESS	ADRIAN, JEONG OCK P.O. BOX 2062		NAME STREET ADDRESS	245/	Still Well R	OVA.	,	
CITY-ST-ZIP	CRESTVIEW, FL 32536		CITY-ST-ZIP	CKESTY IEU	FLORIDA	4 2000		
TITLE NAME	D SANDERS, ELMER	☐ Delete	TITLE NAME		•	☐ Chang	e 🗌 Addition	
STREET ADDRESS	6128 HACIENDA LANE		STREET ADDRESS					
CITY-ST-ZIP	CRESTVIEW, FL 32536	- 	CITY-ST-ZIP	<u>-</u>				
TITLE NAMÉ	D SETTLES, RON	☐ Delete	TITLE NAME			Chang	ie 🔲 Addition	
STREET ADDRESS	5828 LAKE DRIVE		STREET ADDRESS CITY-ST-ZIP					
CHY-ST-ZIP	CRESTVIEW, FL 32539	Delete	TITLE	<u> </u>		☐ Chang	e	
NAME			NAME					
STREET ADDRESS			STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filling 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 convergion 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: SIGNATURE:								

FILED