

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 23, 2006 8:00 am**  
**Secretary of State**

05-23-2006 90011 019 \*\*\*\*61.50

**DOCUMENT # N01000001032**

1. Entity Name

RESCUE MISSION, CHURCH OF GOD IN CHRIST, INC.

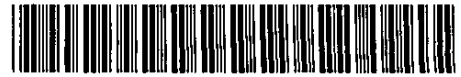


Principal Place of Business

236 NW 34TH AVE.  
FT. LAUDERDALE FL 33311

Mailing Address

236 NW 34TH AVE.  
FT. LAUDERDALE FL 33311



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0569140

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CARTER, LLOYD JR  
236 NW 34TH AVE.  
FT. LAUDERDALE FL 33311

Name

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE DP  
NAME CARTER, LLOYD JR  
STREET ADDRESS 236 NW 34TH AVE.  
CITY-ST-ZIP FT. LAUDERDALE FL 33311 ☐ Delete

TITLE DV  
NAME CARTER, LEOLA  
STREET ADDRESS 236 NW 34TH AVE.  
CITY-ST-ZIP FT. LAUDERDALE FL 33311 ☐ Delete

TITLE DS  
NAME CARTER, TAMARA  
STREET ADDRESS 236 NW 34TH AVE.  
CITY-ST-ZIP FT. LAUDERDALE FL 33311 ☐ Delete

TITLE DT  
NAME DOWNING, DOLLIE MAE  
STREET ADDRESS 236 NW 34TH AVE.  
CITY-ST-ZIP FT. LAUDERDALE FL 33311 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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: *Lloyd Carter Jr* **Lloyd Carter Jr** 5-18-06 954-584-1295