2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006
Secretary of State

DOCUMENT# N01000002716

Entity Name: FULL GOSPEL ASSEMBLY INC. OF VERO BEACH

Current Principal Place of Business:

4420 29 AVE.
CHURCH
VERO BEACH, FL 32962

New Principal Place of Business:

Current Mailing Address:

4420 29 AVE.
CHURCH
VERO BCH, FL 32962

New Mailing Address:

FEI Number: 65-1092344 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JEAN-JUSTE, JEAN-BAPTISTE
1755 41 AVE
VERO BEACH, FL 32960 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	PASD	( ) Delete
Name:	JEAN-JUSTE, JEAN-BAPTISTE	
Address:	1755 41 AVE	
City-St-Zip:	VERO BEACH, FL 32960	
Title:	ASPD	( ) Delete
Name:	JEAN-JUSTE, YOLANDE	
Address:	1755 41 AVE	
City-St-Zip:	VERO BEACH, FL 32960	
Title:	CD	( ) Delete
Name:	JEAN-JUSTE, FITHA	
Address:	1755 41 AVE.	
City-St-Zip:	VERO BCH, FL 32960	
Title:	S	( ) Delete
Name:	BARLATIER, VERONIQUE	
Address:	441 SW DAUPHIN AVE	
City-St-Zip:	PORT SAINT LUCIE, FL 34953	
Title:	CD	( ) Delete
Name:	LACROIX, MARIE EGLA	
Address:	585 8TH LANE	
City-St-Zip:	VERO BEACH, FL 32960	
Title:	CD	( ) Delete
Name:	LACROIX, YLRICK	
Address:	585 8TH LANE	
City-St-Zip:	VERO BEACH, FL 32960	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: VERONIQUE BARLATIER S 04/27/2006

Electronic Signature of Signing Officer or Director — Date