

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003690

FILED
May 06, 2006
Secretary of State

Entity Name: ASSEMBLY OF GOD FAITH TEMPLE CHURCH, INC.

Current Principal Place of Business:

2805 AVENUE T
FORT PIERCE, FL 32950

New Principal Place of Business:

Current Mailing Address:

6255 33RD MANOR
VERO BEACH, FL 32966

New Mailing Address:

FEI Number: 04-3716087 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DAVIS, SIMEL
713 CEDAR PL
FT. PIERCE, FL 34980 US

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: D () Delete
Name: DAVIS, SIMEL
Address: 6255 33RD MANOR
City-St-Zip: VERO BEACH, FL 32966

Title: D () Delete
Name: JOHNSON-DAVIS, BLANCHE D
Address: 6255 33RD MANOR
City-St-Zip: VERO BEACH, FL 32966

Title: DS (X) Delete
Name: WARREN, BETTY
Address: 2805 AVE T
City-St-Zip: VERO BEACH, FL 32950

Title: T (X) Delete
Name: TURNER, TONYA
Address: 718 CEDAR PL
City-St-Zip: FT. PIERCE, FL 34930

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:

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: SIMEL DAVIS

D

05/06/2006

Electronic Signature of Signing Officer or Director

Date