

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004096

FILED
Mar 07, 2006
Secretary of State

Entity Name: CHURCH OF GOD ALFA AND OMEGA, INC.

Current Principal Place of Business:

4404 N. NEBRASKA AVENUE
TAMPA, FL 33604

New Principal Place of Business:

Current Mailing Address:

4404 N. NEBRASKA AVENUE
TAMPA, FL 33604

New Mailing Address:

FEI Number: 01-0575538 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMIREZ, JOSÉ
206 FOXWOOD DRIVE
BRANDON, FL 33510 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: PD () Delete
Name: PACHECO, PABLO
Address: 14000 MONTEREY ST.
City-St-Zip: SPRING HILL, FL 34609

Title: SD () Delete
Name: RAMIREZ, CARMEN
Address: 206 FOXWOOD DR.
City-St-Zip: BRANDON, FL 33510

Title: TD () Delete
Name: RAMIREZ, JOSÉ
Address: 206 FOXWOOD DR.
City-St-Zip: BRANDON, FL 33510

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:

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: JOSE RAMIREZ

PRES

03/07/2006

Electronic Signature of Signing Officer or Director

_____ Date