

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004175

FILED  
May 02, 2007  
Secretary of State

Entity Name: RCCG-SALVATION PARISH, INC.

**Current Principal Place of Business:**

3255 NW 8TH AVENUE  
HOLIDAY INN  
MIAMI, FL 33172 US

**New Principal Place of Business:**

**Current Mailing Address:**

16261 NW 57TH AVENUE  
MIAMI, FL 33014 US

**New Mailing Address:**

FEI Number: 55-0857367      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

OGALI, CHRIS E  
16261 NW 57TH AVE  
MIAMI, FL 33014 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: OGALI, CHRIS E  
Address: 16261 NW 57TH AVE  
City-St-Zip: MIAMI, FL 33014 US

Title: D ( ) Delete  
Name: ISI, JOSEPHINE  
Address: 8046 SW 73RD AVE #108  
City-St-Zip: MIAMI, FL 33143 US

Title: D ( ) Delete  
Name: SUNDAY, ESTHER A  
Address: 6908 37TH STREET  
City-St-Zip: MIRAMAR, FL 33023 US

Title: D ( ) Delete  
Name: ODEWENNWA, BABATOPE  
Address: 1140 NW 155 LN APT 207  
City-St-Zip: MIAMI, FL 33169 US

Title: D ( ) Delete  
Name: MOMAH, ERIC N  
Address: 12801 NW 27TH AVENUE APT M205  
City-St-Zip: MIAMI, FL 33167 US

**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:

I hereby certify that the information supplied with this filing does not qualify 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: CHRIS OGALI

PD

05/02/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date