

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006234

FILED
Apr 14, 2006
Secretary of State

Entity Name: SHEKINAH MOUNTAIN BIBLE FELLOWSHIP, INC.

Current Principal Place of Business:

PO BOX 15365
PLANTATION, FL 33318

New Principal Place of Business:

Current Mailing Address:

PO BOX 15365
PLANTATION, FL 33318

New Mailing Address:

FEI Number: 65-1128376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SINGLETARY, MEREDITH W
PO BOX 15365
PLANTATION, FL 33318 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: DP () Delete
Name: SINGLETARY, MEREDITH W PASTOR
Address: 70 SW 91 AVENUE # 101
City-St-Zip: PLANTATION, FL 33324

Title: DV () Delete
Name: SINGLETARY, SAN W
Address: 70 SW 91 AVENUE # 101
City-St-Zip: PLANTATION, FL 33324

Title: D () Delete
Name: SAUNDERS, VALERIE L
Address: 900-A SW 80 AVENUE
City-St-Zip: NORTH LAUDERDALE, FL 33068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SINGLETARY, MEREDITH W PASTOR
Address: 5320 SW 8TH STREET
City-St-Zip: PLANTATION, FL 33317 US

Title: DV (X) Change () Addition
Name: SINGLETARY, SAN W
Address: 5320 SW 8TH STREET
City-St-Zip: PLANTATION, FL 33317 US

Title: D (X) Change () Addition
Name: SAUNDERS, VALERIE L
Address: 900-A SW 80 AVENUE
City-St-Zip: NORTH LAUDERDALE, FL 33068 US

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: SAN W SINGLETARY

DVP

04/14/2006

Electronic Signature of Signing Officer or Director

Date