

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006812

FILED
Jun 20, 2005
Secretary of State

Entity Name: ALL GOD'S CHILDREN NONDENOMINATIONAL BIBLE TEMPLE, INCORPORATED

Current Principal Place of Business:

618 AUBURN AVE
MELBOURNE, FL 32901

New Principal Place of Business:

Current Mailing Address:

2117 S BABCOCK ST
STE 229
MELBOURNE, FL 32901

New Mailing Address:

FEI Number: 59-3741312 **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:

HOGANS, PAULA
618 AUBURN AVE
MELBOURNE, FL 32901 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: D () Delete
Name: GRAHAM, CATHERINE
Address: 199 HIGHWAY A1A #A212
City-St-Zip: SATELLITE BEACH, FL 32937

Title: D () Delete
Name: HOGANS, IV, JOHN ED
Address: 618 AUBURN AVENUE
City-St-Zip: MELBOURNE, FL 32901

Title: D () Delete
Name: HOGANS, PAULA
Address: 618 AUBURN AVENUE
City-St-Zip: MELBOURNE, FL 32901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GRAHAM, CATHERINE
Address: 2630 CHOCTAW DRIVE
City-St-Zip: MELBOURNE, FL 32935

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 Section 119.07(3)(i), 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: JOHN ED HOGANS IV

D

06/20/2005

Electronic Signature of Signing Officer or Director

Date