


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**

**Jan 27, 2006 08:00 AM  
Secretary of State**

<b>DOCUMENT # N02000001231</b>	
<b>1. Entity Name</b> THE CHURCH OF GOD OF PROPHECY STATE OFFICES IN FLORIDA, INC.	

<b>Principal Place of Business</b> 855 SOUTH DILLARD STREET WINTER GARDEN FL 34787	<b>Mailing Address</b> POST OFFICE BOX 783156 WINTER GARDEN FL 34778-3156
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<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE	CR2E037 (10/05)
<b>4. FEI Number</b> 75-3010465	Applied For Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

<b>6. Name and Address of Current Registered Agent</b>  LEIGH, RICHARD A 1031 W MORSE BLVD SUITE 350 WINTER PARK FL 32789	<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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**8. 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. I am familiar with, and accept the obligations of registered agent.**

**SIGNATURE** \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ **DATE** \_\_\_\_\_

<b>FILE NOW: FEE IS \$61.25</b> <b>Due By May 1, 2006</b>	<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>Make Check Payable to</b> <b>Florida Department of State</b>
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<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
<b>TITLE</b> PD <input type="checkbox"/> Delete	<b>NAME</b> DOTSON, L J	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Add
<b>STREET ADDRESS</b> POST OFFICE BOX 783156	<b>CITY-ST-ZIP</b> WINTER GARDEN FL 34778-3156	<b>NAME</b>	<b>STREET ADDRESS</b> U00000403936
<b>CITY-ST-ZIP</b>		<b>CITY-ST-ZIP</b>	<b>02/06/06-80029-018 61.25</b>
<b>TITLE</b> D <input type="checkbox"/> Delete	<b>NAME</b> MILLER, LARRY	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Add
<b>STREET ADDRESS</b> 24165 DAN BROWN HILL ROAD	<b>CITY-ST-ZIP</b> BROOKSVILLE FL 34602	<b>NAME</b>	<b>STREET ADDRESS</b>
<b>CITY-ST-ZIP</b>		<b>CITY-ST-ZIP</b>	
<b>TITLE</b> D <input type="checkbox"/> Delete	<b>NAME</b> DAVIS, WILLIE	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Add
<b>STREET ADDRESS</b> POST OFFICE BOX 680634	<b>CITY-ST-ZIP</b> WINTER GARDEN FL 34787	<b>NAME</b>	<b>STREET ADDRESS</b>
<b>CITY-ST-ZIP</b>		<b>CITY-ST-ZIP</b>	
<b>TITLE</b> <input type="checkbox"/> Delete		<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Add
<b>NAME</b>		<b>NAME</b>	
<b>STREET ADDRESS</b>		<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>		<b>CITY-ST-ZIP</b>	
<b>TITLE</b> <input type="checkbox"/> Delete		<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Add
<b>NAME</b>		<b>NAME</b>	
<b>STREET ADDRESS</b>		<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>		<b>CITY-ST-ZIP</b>	
<b>TITLE</b> <input type="checkbox"/> Delete		<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Add
<b>NAME</b>		<b>NAME</b>	
<b>STREET ADDRESS</b>		<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>		<b>CITY-ST-ZIP</b>	

**12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:** L. J. Dotson (PD) 1/24/06 407-877-0733