2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**



FILED

1. Enlity Name						- CORNEL CONTROL CONTR	Jan 26, 200 Secretai			
THE CHU		GOD OF PROPHEC	CY STATE (OFFICES			Secretar	york	, tute	
Principal Place of Business Ma		Mailing Add	Mailing Address							
				ICE BOX 783 ARDEN FL 3						
2. Principal Place of Business - No P.O Box # 3.			3. Mailing Ad	3. Mailing Address			BBIIB IIDII BBIII BBIII BBIII BBIII BBII		3 0 1 4	
Suite, Apt. #, etc.		Suite, Apt. #, otc.			1st MOORE CR2E037 (10/06)					
City & State		City & State			4. FEI Number	5-3010465	-	oplied For of Applicable		
Zip		Country	Zip		Country	5. Cortificate of Sta	atus Desired 🔲	\$8.75 Add Fee Required		
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent				
					Name	Name				
LEIGH, RICHARD A 1031 W MORSE BLVD					Street Address	Street Address (P.O. Box Number is Not Acceptable)				
SUITE 350 WINTER PARK FL 32789										
WINTER PARK FL 32789					City	City FL Zip Code				
	named entit tions of regist	y submits this statement for lorod agent	the purpose of	changing its re	egistered office or regis	lored agent, or both, in	the State of Florida. I am	familiar with,	and accopt	
CIONIATURE										
SIGNATURE		List printed name of rugistered agent a	nd life if applicable	INOTE:	Registered Agent signature requi	red when roinstating)	DATE			
		/: FEE IS \$61.25 / May 1, 2007	9.	Election Camp Trust Fund Co	paign Financing Intribution.	\$5.00 May Be Added to Fees	Make Check Florida Depar			
10.				-	• • —	Added to Fees		tment of S	State	
	PD DOTSON, POST OFF	OFFICERS AND DIR	ECTORS	-	ntribution.	Added to Fees ADDITIONS/CHANGE	Florida Depar	RECTORS IN	1 10 Addition	
10. BILL NAME STREET ADDRESS	PD DOTSON, POST OFF WINTER G	May 1, 2007 OFFICERS AND DIR	ECTORS C	Trust Fund Co	T1. HILF NAME SHRETADDRESS CHY-SI-7/P	Added to Fees ADDITIONS/CHANGE	Florida Depar	tment of S RECTORS IN Change	I 10 Addition	
10. DILL NAME SIRTET ADDRESS CITY-ST-7IP	PD DOTSON, POST OFF	OFFICERS AND DIR OFFICERS AND DIR L J FICE BOX 783156 ARDEN FL 34778-3156	ECTORS C	Trust Fund Co	11. HILL NAME SIRETADDRESS	Added to Fees ADDITIONS/CHANGE	Florida Depar	RECTORS IN	1 10 Addition	
10. DILL NAME SIRIET ADDRESS CITY-SI-7IP	PD DOTSON, POST OFF WINTER GD MILLER, L 24165 DAI	OFFICERS AND DIR OFFICERS AND DIR L J FICE BOX 783156 ARDEN FL 34778-3156	ECTORS C	Trust Fund Co	I 11. HILF NAME SHRETADDRESS CHY-SI-7/P	Added to Fees ADDITIONS/CHANGE	Florida Depar	tment of S RECTORS IN Change	I 10 Addition	
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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 offect as if made under eath; 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: Sylving AND TYPER OF BOTHE NAME OF

Sylvia M BAJes

1-23-07

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