## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000001738

FILED May 25, 2005 Secretary of State

| Entity Nai                                  | me: CITY OF REFUGE CHURCH OF OUF  | R LORD JESUS CHRIST OF THE                  | EAPOSTOLIC FAITH, INC.                      |  |
|---|---|---|---|--|
| Current Principal Place of Business:        |   | New Principal Place                         | New Principal Place of Business:            |  |
| 123 JEAN<br>DAYTONA                         | STREET<br>ABEACH, FL 32114  |   |   |  |
| Current Mailing Address:                    |   | New Mailing Addres                          | New Mailing Address:                        |  |
|   | OISON AVENUE<br>A BEACH, FL 32114   |   |   |  |
|   | : 20-1072914 FEI Number Applied For ( ) ce with s. 607.193(2)(b), F.S., the corporation did | •   | Certificate of Status Desired ( )           |  |
| Name and                                    | Address of Current Registered Agent:  | Name and Address                            | of New Registered Agent:                    |  |
| 1126 MÁD                                    | MARCUS R SR<br>NISON AVENUE<br>NISEACH, FL 32114 US   |   |   |  |
|   | named entity submits this statement for the e of Florida.                                   | purpose of changing its registere           | ed office or registered agent, or both,     |  |
| SIGNATU                                     | RE:   |   |   |  |
|   | Electronic Signature of Registered A  | gent  | Date  |  |
| OFFICERS AND DIRECTORS:                     |   | ADDITIONS/CHANG                             | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | T () Delete<br>MCCOY, MARCUS R SR.<br>1126 MADISON AVENUE<br>DAYTONA BEACH, FL 32114        | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                     |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | T () Delete<br>MCCOY, LUKE B SR.<br>1340 IMPERIAL DRIVE<br>DAYTONA BEACH, FL 32117          | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                     |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | T () Delete<br>MCCOY, BENONA<br>6265 WILLIAMSON BLVD. #1217<br>PORT ORANGE, FL 32128        | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                     |  |

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: MARCUS R MCCOY SR 05/25/2005 Τ