2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002351

FILED Jan 15, 2006 Secretary of State

Entity Name: SPIRIT-FILLED LIFE FULL GOSPEL CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

5402 WINTER GARDEN PKWY 5804 WINTER GARDEN PKWY FT PIERCE, FL 34951 US FT PIERCE, FL 34951 US

Current Mailing Address: New Mailing Address:

P.O. BOX 9501

PORT ST. LUCIE, FL 34985

FEI Number: 71-0868552 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NEWSOME, NATHANIEL PASTOR
5402 WINTER GARDEN PKWY
FT PIERCE, FL 34951 US

NEWSOME SR., NATHANIEL PASTOR
5804 WINTER GARDEN PKWY
FT PIERCE, FL 34951 US

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: NATHANIEL NEWSOME SR. 01/15/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: NEWSOME, NATHANIEL PASTOR Name: NEWSOME SR., NATHANIEL PASTOR Address: 5402 WINTER GARDEN PKWY Address: 5804 WINTER GARDEN PKWY City-St-Zip: FT PIERCE, FL 34951 US FT PIERCE, FL 34951 US

Title: VD () Delete Title: (X) Change () Addition NEWSOME, VALENCIA Name: NEWSOME, VALENCIA L CO PAST Name: Address: 5402 WINTER GARDEN PKWY Address: 5804 WINTER GARDEN PKWY City-St-Zip: FT PIERCE, FL 34951 US City-St-Zip: FT PIERCE, FL 34951 US

Title: S () Delete Title: () Change () Addition Name: WILLIAMS, VERA Name:

 Name:
 WILLIAMS, VERA
 Name:

 Address:
 2040 COLONIAL AVE
 Address:

 City-St-Zip:
 FORT PIERCE, FL 34950 US
 City-St-Zip:

Title: TR () Delete Title: TR (X) Change () Addition

 Name:
 WILLIAMS, FRANK
 Name:
 TAYLOR, DERRICK

 Address:
 2040 COLONIAL AVE
 Address:
 1834 SW MORERIA

 City-St-Zip:
 FORT PIERCE, FL 34950 US
 City-St-Zip:
 PORT ST LUCIE, FL 34953 US

Title: S () Delete Title: S (X) Change () Addition Name: PERLOTE, DEVON M Name: PERLOTE, DEVON M

Address: 5402 WINTERGARDEN PARKWAY Address: 601 AVE B

City-St-Zip: FORT PIERCE, FL 34951 US City-St-Zip: FORT PIERCE, FL 34950 US

Title: TR () Delete Title: TR (X) Change () Addition

 Name:
 KIM, WOLFF
 Name:
 TAYLOR, MAXINE

 Address:
 4016 N.W. GOLDENROD ROAD APT # 207
 Address:
 1834 SW MORERIA

City-St-Zip: JENSEN BEACH, FL 34957 US City-St-Zip: PORT ST LUCIE, FL 34953 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: NATHANIEL NEWSOME SR. PD 01/15/2006

Electronic Signature of Signing Officer or Director

Date