

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002351

FILED
Jan 16, 2009
Secretary of State

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

Current Principal Place of Business:

788 BENT CREEK BLVD
FT PIERCE, FL 34947 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 9501
PORT ST. LUCIE, FL 34985

New Mailing Address:

FEI Number: 71-0868552

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWSOME SR., NATHANIEL PASTOR
788 BENT CREEK BLVD
FT PIERCE, FL 34947 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: PD () Delete
Name: NEWSOME SR., NATHANIEL PASTOR
Address: 788 BENT CREEK BLVD
City-St-Zip: FT PIERCE, FL 34947 US

Title: VD () Delete
Name: NEWSOME, VALENCIA L CO PAST
Address: 788 BENT CREEK BLVD
City-St-Zip: FT PIERCE, FL 34947 US

Title: O () Delete
Name: WILLIAMS, VERA OFFICER
Address: 5825 SPANISH RIVER ROAD
City-St-Zip: FORT PIERCE, FL 34951 US

Title: S () Delete
Name: PERLOTE, DEVON M ASST. S
Address: 609 A MAPLE AVE
City-St-Zip: FORT PIERCE, FL 34982 US

Title: S () Delete
Name: NELOM, KEN SEC
Address: 609 A MAPLE AVE
City-St-Zip: FORT PIERCE, FL 34982

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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.

P

01/16/2009

Electronic Signature of Signing Officer or Director

Date