

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

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90096 034 ****61.25

DOCUMENT # N02000004061

1. Entity Name

ALPHA AND OMEGA CHRISTIAN MINISTRY INC.



Principal Place of Business

Mailing Address

1365 US HIGHWAY 1
VERO BEACH FL 32962

1365 US HWY 1
VERO BEACH FL 32962



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

01-0682152

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LOCKHART, WILLIE A
1296 10TH A VE. SW
VERO BCH FL 32962

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Willie A Lockhart

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1-28-07

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME LOCKHART, WILLIE A
STREET ADDRESS 1296 10TH AVE/ SW
CITY - ST - ZIP VERO BEACH FL 32962

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE SD ☐ Delete
NAME LOCKHART, RUBY J
STREET ADDRESS 1296 10TH AVE. SW
CITY - ST - ZIP VERO BEACH FL 32962

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE D ☐ Delete
NAME PIERCE, WILLIE J
STREET ADDRESS 4301 US 1
CITY - ST - ZIP VERO BCH FL 32986

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE D ☐ Delete
NAME ANTHONY, WALTON
STREET ADDRESS 312 DECORDRE CT. APT. A
CITY - ST - ZIP FORT PIERCE FL 34950

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE SD ☒ Delete
NAME WALKER, ERNESTINE
STREET ADDRESS 1110 AVE. K
CITY - ST - ZIP FORT PIERCE FL 34950

TITLE ☐ Change ☒ Addition
NAME Mary Robinson
STREET ADDRESS 5856 59th Court
CITY - ST - ZIP Vero Beach, FL 32967

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

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:

Willie A Lockhart (Pastor)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-28-07 772-569-4755

Date

Daytime Phone #