

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004637

FILED
Sep 08, 2004
Secretary of State

Entity Name: CHURCH OF GOD IN CHRIST, GENESIS, INC.

Current Principal Place of Business:

3900 N SEACREST BLVD
LANTANA, FL 33462

New Principal Place of Business:

Current Mailing Address:

23009 PEACHLAND BLVD.
PORT CHARLOTTE, FL 33954

New Mailing Address:

FEI Number: 76-0702061

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, JIMMIE L
23009 PEACHLAND BLVD.
PORT CHARLOTTE, FL 33954 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: P () Delete
Name: ROBINSON, JIMMIE L
Address: 23009 PEACHLAND BLVD.
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: ST () Delete
Name: ROBINSON, JOANNE W
Address: 23009 PEACHLAND BLVD.
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: D () Delete
Name: STOKES, VERONICA
Address: 3900 N SEACREST BLVD
City-St-Zip: LANTANA, FL 33462

Title: D () Delete
Name: WEBSTER, CONNIE
Address: 1205 14TH CT. S. AVE
City-St-Zip: LAKE WORTH, FL 33460

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:

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: JIMMY L ROBINSON

P

09/08/2004

Electronic Signature of Signing Officer or Director

Date