

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 29, 2008 08:00 AM
Secretary of State

DOCUMENT # N02000007962

1. Entity Name

CHURCH OF GOD JOHN 3:16 INC.



Principal Place of Business

2 S. TEXAS AVE.
ORLANDO FL 32805

Mailing Address

P. O. BOX 617
CLARCONA FL 32710



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 (10/07)

4. FEI Number

56-2317431

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DIAZ, BEZALEEL
8134 COUNTRY RUN PRKWY.
ORLANDO FL 32818

7. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

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

TITLE PD ☐ Delete
NAME DIAZ, BEZALEEL
STREET ADDRESS 8134 COUNTRY RUN PRKWY.
CITY-STATE-ZIP ORLANDO FL 32818

TITLE SD ☐ Delete
NAME HERNANDEZ, ADRIEL L
STREET ADDRESS 2257 GREENVIEW CIR.
CITY-STATE-ZIP ORLANDO FL 32808

TITLE TD ☐ Delete
NAME MIRAMBEAUX, LUIS
STREET ADDRESS 3853 N LAKE ORLANDO PKWY
CITY-STATE-ZIP ORLANDO FL 32808

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS U000000843999
CITY-STATE-ZIP 03/12/08-80018-007 70.00

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

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NAME
STREET ADDRESS
CITY-STATE-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:

Bezaleel Diaz

2/24/08 407456-0051