


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 22, 2007 8:00 am**  
**Secretary of State**

01-22-2007 90076 030 \*\*\*\*61.25

|  |                                  |  |  |   |  |
|--|----------------------------------|--|--|---|--|
| <b>DOCUMENT # N02364</b><br>1. Entity Name<br><b>COMMUNITY CHURCH OF GOD OF FORT LAUDERDALE, INC.</b>  |                                  |  |  |  |  |
| Principal Place of Business<br><b>1300 N.W. 19TH COURT<br/>FORT LAUDERDALE, FL 33311</b>   |                                  |  |  | Mailing Address<br><b>1300 N.W. 19TH COURT<br/>FORT LAUDERDALE, FL 33311</b>      |  |
| 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  | 01182007 Chg-NP CR2E037 (12/06)   |  |
| 4. FEI Number<br><b>65-0119470</b>   |                                  |  |  | Applied For<br><input type="checkbox"/> Not Applicable                            |  |
| 5. Certificate of Status Desired <input type="checkbox"/>  |                                  |  |  | <b>\$8.75 Additional Fee Required</b>   |  |
| 6. Name and Address of Current Registered Agent  |                                  |  | 7. Name and Address of New Registered Agent  |   |  |
| <b>EUBANKS, JAMES C.<br/>2048 N.W. 10TH AVE.<br/>FT. LAUDERDALE, FL 33311</b>  |                                  |  | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div> |   |  |
| 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 _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>  |                                  |  |  |   |  |
| <b>Filing Fee is \$61.25<br/>Due by May 1, 2007</b>  |                                  | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> |  | <b>\$5.00 May Be Added to Fees</b>  |  |
| <b>Make check payable to Florida Department of State</b>   |                                  |  |  |   |  |
| 10. OFFICERS AND DIRECTORS   |                                  |  | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  |   |  |
| TITLE  | PD                               | <input type="checkbox"/> Delete  | TITLE  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                 |  |
| NAME   | <b>EUBANKS, JAMES C.</b>         |  | NAME   |   |  |
| STREET ADDRESS   | <b>2048 NW 10TH AVE</b>          |  | STREET ADDRESS   |   |  |
| CITY-ST-ZIP  | <b>FT. LAUDERDALE, FL</b>        |  | CITY-ST-ZIP  |   |  |
| TITLE  | AT                               | <input type="checkbox"/> Delete  | TITLE  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                 |  |
| NAME   | <b>SCOTT, LONNIE</b>             |  | NAME   |   |  |
| STREET ADDRESS   | <b>2594 NW 15TH COURT</b>        |  | STREET ADDRESS   |   |  |
| CITY-ST-ZIP  | <b>FORT LAUDERDALE, FL 33311</b> |  | CITY-ST-ZIP  |   |  |
| TITLE  | STD                              | <input type="checkbox"/> Delete  | TITLE  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                 |  |
| NAME   | <b>EUBANKS, HAROLD E</b>         |  | NAME   |   |  |
| STREET ADDRESS   | <b>2980 NW 24TH AVE</b>          |  | STREET ADDRESS   |   |  |
| CITY-ST-ZIP  | <b>FORT LAUDERDALE, FL 33311</b> |  | CITY-ST-ZIP  |   |  |
| TITLE  | S                                | <input type="checkbox"/> Delete  | TITLE  | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition      |  |
| NAME   | <b>BAILY, DESHONDA</b>           |  | NAME   |   |  |
| STREET ADDRESS   | <b>751 LYONS RD APT 18207</b>    |  | STREET ADDRESS   | <b>7975 Margate Blvd, #206</b>  |  |
| CITY-ST-ZIP  | <b>POMPAHO BEACH, FL 33063</b>   |  | CITY-ST-ZIP  | <b>Margate, FL 33063</b>  |  |
| TITLE  | T                                | <input type="checkbox"/> Delete  | TITLE  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                 |  |
| NAME   | <b>FULLER, MICHAEL</b>           |  | NAME   |   |  |
| STREET ADDRESS   | <b>7401 NW 37TH STREET</b>       |  | STREET ADDRESS   |   |  |
| CITY-ST-ZIP  | <b>LAUDERHILL, FL 33319</b>      |  | CITY-ST-ZIP  |   |  |
| TITLE  | <input type="checkbox"/> Delete  |  | TITLE  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                 |  |
| NAME   |                                  |  | NAME   |   |  |
| STREET ADDRESS   |                                  |  | STREET ADDRESS   |   |  |
| CITY-ST-ZIP  |                                  |  | CITY-ST-ZIP  |   |  |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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. |                                  |  |  |   |  |
| <b>SIGNATURE:</b> <u>James C Eubanks</u><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>  |                                  |  | <b>01-18-07</b> <b>954-527-4551</b><br><small>Date Daytime Phone #</small>   |   |  |