

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 13, 2007
Secretary of State

DOCUMENT# N03000001617

Entity Name: ALPHA AND OMEGA CHURCH OF OUR LORD JESUS CHRIST, INC.**Current Principal Place of Business:**2380 DR. MARTIN LUTHER KING BLVD., #3
POMPANO BEACH, FL 33060**New Principal Place of Business:****Current Mailing Address:**500 NW 7TH TERRACE
POMPANO BEACH, FL 33060**New Mailing Address:****FEI Number:** 01-0767111**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LACY, WILLIS
500 NW 7TH TERRACE
POMPANO BEACH, FL 33060 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: LACY, WILLIS PASTOR
Address: 500 NW 7TH TERRACE
City-St-Zip: POMPANO BEACH, FL 33060**Title:** TD () Delete
Name: MOORE, JAMI
Address: 1281 SW 10TH TERRACE
City-St-Zip: DEERFIELD BEACH, FL 33441**Title:** SD () Delete
Name: JOHNSON, MARLON
Address: 5051 WILES RD 306
City-St-Zip: POMPANO BEACH, FL 33073**Title:** D () Delete
Name: WILSON, JESSIE JR.
Address: 445 NW 1 TERRACE
City-St-Zip: DEERFIELD BEACH, FL 33441**Title:** D () Delete
Name: HARP, MARTHA
Address: 2320 NW 6TH STREET
City-St-Zip: POMPANO BEACH, FL 33069**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** SD (X) Change () Addition
Name: LACY, LINDA B
Address: 500 NW 7TH TERRACE
City-St-Zip: POMPANO BEACH, FL 33060**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: WILLIS LACY

PD

07/13/2007

Electronic Signature of Signing Officer or Director

Date