## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Aug 31, 2006 8:00 am Secretary of State

08-31-2006 90002 008 \*\*\*\*61.25

## **DOCUMENT # N03000004893**

1. Entity Name FAMILY OF GOD BUILDING MINISTRY, INC.



Principal Place of Business 957 SCHOOLHOUSE RD LAKELAND FL 33813 Mailing Address
957 SCHOOLHOUSE RD

LAKELAND, F	HUUSE RD L 33813	LAKELAND, FL 33813							
					1 KOO (1901 OL) 101	<b> </b>	8/881   18/10   18/18   18/	T	
	ace of Business	3. Mailing Address 9	7 schoo	Thouse					
5uite, Apt.	treative DR.	Suite, Apt. #, etc.	3 381	3	05000000				
	1, Nite C-33+29				05022006 (	Chg-NP CR2	E037 (4/06)		
City & State	C	City & State	CI		4. FEI Number 36-45427	759	<del>-  -</del>	plied For t Applicable	
LAKE	Country	LAKELAND Zip	Country			<u> </u>	\$8.75 Add		
33813	3 folk	338/3	POLK	<u>.                                    </u>	5. Certificate of		Fee Require	d	
	6. Name and Address of Current	Registered Agent	Name		7. Name and Ac	dress of New Registere	d Agent		
PETERKIN, JERALD									
957 SCHOOLHOUSE RD LAKELAND, FL 33813			Street /	Street Address (P.O. Box Number is Not Acceptable)					
LANCLAINE	J, I L 33013								
			City			F	L Zip Cod	0	
8. The above	named entity submits this statement fo	r the purpose of changing its	registered office of	or register	ed agent, or both,	in the State of Florida. I a	m familiar with,	and accept	
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.									
0.0147.105									
SIGNATURE.	Signature, typed or printed name of registered agent	and tale if applicable (NOTE	Registered Agent signs	grante i edna eq	when reinstating)	DATE		· · · · · · · · · · · · · · · · · · ·	
	Filing Foo le \$61.25	9. Flection Can	paign Financing		\$5.00 May Be	Make che	ck payable t	<del></del>	
			· · · · · · · · · · · · · · · · · · ·		Added to Fees	1	artment of S		
10.	OFFICERS AND DIF	RECTORS	11.	-	DOLLIONS/CHAN	IGES TO OFFICERS AND I	DIDECTORS IN	10	
				<u> </u>	10011011010101111111	GEO TO GITTOLITO AILE	DIFFECTORO IN		
TITLE	CD	Delete	TITLE	P	10		Change	Addition	
NAME	SAM, TIMOTHY	<b>☑</b> Delete	TITLE NAME	70	IC RELATER	terkins			
		<b>☑</b> Delete	TITLE	70 957	IC RALD RESCHOOLAGE	terkinl use Ry			
NAME STREET ADDRESS	SAM, TIMOTHY 206 WEST OREGON RD	☐ Delete	TITLE NAME STREET ADORESS	JE 1957 LAK	RALD RESCHOOLAGE	terkinl use Ro L 338/3			
NAME STREET ADDRESS CITY-ST-2IP	SAM, TIMOTHY 206 WEST OREGON RD LEHIGH ACRE, FL 33936		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Je 1957 LAK	RALD PE Schoolho Celang P	terkinl use Ro L 338/3 terkial	Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP THLE NAME STREET ADDRESS	SAM, TIMOTHY 206 WEST OREGON RD LEHIGH ACRE, FL 33936 VD SAM, ELLA J 206 WEST OREGON RD		TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P 787 LAK	IC RALD PERSONNELLAND PERSONNE	terking use RD L-338/3 terkin Ave L-171	Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP THILE NAME	SAM, TIMOTHY 206 WEST OREGON RD LEHIGH ACRE, FL 33936 VD SAM, ELLA J 206 WEST OREGON RD LEHIGH ACRE, FL 33936	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P 787 LAK	RALD PE Schoolho Celang P	terking use RD L-338/3 terkin Ave L-171	Change Change	✓ Addition  ☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP THILE NAME STREET ADDRESS CITY-ST-ZIP THILE	SAM, TIMOTHY 206 WEST OREGON RD LEHIGH ACRE, FL 33936 VD SAM, ELLA J 206 WEST OREGON RD LEHIGH ACRE, FL 33936 D		TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	IC RALD PE Schoolho CELANG P A J. Per 101 N. FL. 194 FL. 3	terking use Rd L 338/3 terkin Ave L-171 3613	Change	✓ Addition  ☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP THILE NAME STREET ADDRESS CITY-ST-ZIP THILE NAME	SAM, TIMOTHY 206 WEST OREGON RD LEHIGH ACRE, FL 33936 VD SAM, ELLA J 206 WEST OREGON RD LEHIGH ACRE, FL 33936 D WILSON, ETHEL V	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P JE 7 1957 LAK T I I I I I I I I I I I I I I I I I I I	AJ. Ph	terking use Ro L 338/3 terkind Ave L-171 3613 ;111Ps	Change Change	✓ Addition  ☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP THILE NAME STREET ADDRESS CITY-ST-ZIP THILE	SAM, TIMOTHY 206 WEST OREGON RD LEHIGH ACRE, FL 33936 VD SAM, ELLA J 206 WEST OREGON RD LEHIGH ACRE, FL 33936 D	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	7 139 TAM DILL 139	AJ. Ph.	terking use RD L-338/3 terkind AVE L-171 3613 ;111PS AVE L-171	Change Change	✓ Addition  ☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP  THILE NAME STREET ADDRESS CITY-ST-ZIP  HILE NAME STREET ADDRESS	SAM, TIMOTHY 206 WEST OREGON RD LEHIGH ACRE, FL 33936  VD SAM, ELLA J 206 WEST OREGON RD LEHIGH ACRE, FL 33936  D WILSON, ETHEL V 6807 PARKVIEW CT #102	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	TENTELLE ISP	AJ. Ph.  AJ. Ph.  AJ. Ph.  AJ. Ph.  AJ. Ph.  AJ. Ph.	terking use RD L 338/3 terkind Ave L-171 3613 :11ips Ave L-171 33613	Change Change	✓ Addition  ☐ Addition	
NAME STREET ADDRESS CITY-SI-ZIP  THTLE NAME STREET ADDRESS CITY-ST-ZIP  THTLE NAME STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  STREET ADDRESS CITY-SI-ZIP	SAM, TIMOTHY 206 WEST OREGON RD LEHIGH ACRE, FL 33936 VD SAM, ELLA J 206 WEST OREGON RD LEHIGH ACRE, FL 33936 D WILSON, ETHEL V 6807 PARKVIEW CT #102 TAMPA, FL 33604	□ Delete □ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	TENTELLE ISP	AJ. Ph.  AJ. Ph.  AJ. Ph.  AJ. Ph.  AJ. Ph.  AJ. Ph.	terking use RD L 338/3 terkind Ave L-171 3613 :11ips Ave L-171 33613	Change Change	Addition  Addition	
NAME STREET ADDRESS CITY-SI-ZIP  THTLE NAME STREET ADDRESS CITY-ST-ZIP  THTLE NAME STREET ADDRESS CITY-SI-ZIP  THTLE NAME STREET ADDRESS CITY-SI-ZIP  THTLE NAME STREET ADDRESS STREET ADDRESS	SAM, TIMOTHY 206 WEST OREGON RD LEHIGH ACRE, FL 33936  VD SAM, ELLA J 206 WEST OREGON RD LEHIGH ACRE, FL 33936  D WILSON, ETHEL V 6807 PARKVIEW CT #102 TAMPA, FL 33604  D WILSON, JIMMY 6807 PARKVIEW CT #102	□ Delete □ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	7 139 14 139 14 139 14 139 14 139 14 139 14 139 14 139 14 15 15 16 16 16 16 16 16 16 16 16 16 16 16 16	AJ. Ph.  AJ.	terking use RD L 338/J terkind Ave L-171 3613 ; 11:PS AVE L-171 33613 Hammington idge Blvb. E	Change Change	Addition  Addition	
NAME STREET ADDRESS CITY-SI-ZIP  THTLE NAME STREET ADDRESS CITY-ST-ZIP  THTLE NAME STREET ADDRESS CITY-ST-ZIP  THTLE NAME STREET ADDRESS CITY-SI-ZIP  THTLE NAME NAME	SAM, TIMOTHY 206 WEST OREGON RD LEHIGH ACRE, FL 33936 VD SAM, ELLA J 206 WEST OREGON RD LEHIGH ACRE, FL 33936 D WILSON, ETHEL V 6807 PARKVIEW CT #102 TAMPA, FL 33604 D WILSON, JIMMY	□ Delete □ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	7 139 14 139 14 139 14 139 14 139 14 139 14 139 14 139 14 15 15 16 16 16 16 16 16 16 16 16 16 16 16 16	AJ. Ph.  AJ. Ph.  AJ. Ph.  AJ. Ph.  AJ. Ph.  AJ. Ph.	terking use RD L 338/J terkind Ave L-171 3613 ; 11:PS AVE L-171 33613 Hammington idge Blvb. E	Change Change	Addition  Addition	
NAME STREET ADDRESS CITY-ST-ZIP  THTLE NAME STREET ADDRESS CITY-ST-ZIP HITLE	SAM, TIMOTHY 206 WEST OREGON RD LEHIGH ACRE, FL 33936 VD SAM, ELLA J 206 WEST OREGON RD LEHIGH ACRE, FL 33936 D WILSON, ETHEL V 6807 PARKVIEW CT #102 TAMPA, FL 33604 D WILSON, JIMMY 6807 PARKVIEW CT #102 TAMPA, FL 33604 P	□ Delete □ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	7 139 14 139 14 139 14 139 14 139 14 139 14 139 14 139 14 15 15 16 16 16 16 16 16 16 16 16 16 16 16 16	AJ. Ph.  AJ.	terking use RD L 338/J terkind Ave L-171 3613 ; 11:PS AVE L-171 33613 Hammington idge Blvb. E	Change Change	Addition  Addition	
NAME STREET ADDRESS CITY-ST-ZIP  THTLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME	SAM, TIMOTHY 206 WEST OREGON RD LEHIGH ACRE, FL 33936 VD SAM, ELLA J 206 WEST OREGON RD LEHIGH ACRE, FL 33936 D WILSON, ETHEL V 6807 PARKVIEW CT #102 TAMPA, FL 33604 D WILSON, JIMMY 6807 PARKVIEW CT #102 TAMPA, FL 33604 P PETERKIN, JERALD	□ Delete □ Delete □ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	7 139 14 139 14 139 14 139 14 139 14 139 14 139 14 139 14 15 15 16 16 16 16 16 16 16 16 16 16 16 16 16	AJ. Ph.  AJ.	terking use RD L 338/J terkind Ave L-171 3613 ; 11:PS AVE L-171 33613 Hammington idge Blvb. E	Change Change	Addition  Addition  Addition	
NAME STREET ADDRESS CITY-ST-ZIP  THTLE NAME STREET ADDRESS CITY-ST-ZIP HITLE	SAM, TIMOTHY 206 WEST OREGON RD LEHIGH ACRE, FL 33936 VD SAM, ELLA J 206 WEST OREGON RD LEHIGH ACRE, FL 33936 D WILSON, ETHEL V 6807 PARKVIEW CT #102 TAMPA, FL 33604 D WILSON, JIMMY 6807 PARKVIEW CT #102 TAMPA, FL 33604 P	□ Delete □ Delete □ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	7 139 14 139 14 139 14 139 14 139 14 139 14 139 14 139 14 15 15 16 16 16 16 16 16 16 16 16 16 16 16 16	AJ. Ph.  AJ.	terking use RD L 338/J terkind Ave L-171 3613 ; 11:PS AVE L-171 33613 Hammington idge Blvb. E	Change Change	Addition  Addition  Addition	
NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  HITLE NAME STREET ADDRESS CITY-ST-ZIP	SAM, TIMOTHY 206 WEST OREGON RD LEHIGH ACRE, FL 33936  VD SAM, ELLA J 206 WEST OREGON RD LEHIGH ACRE, FL 33936  D WILSON, ETHEL V 6807 PARKVIEW CT #102 TAMPA, FL 33604  D WILSON, JIMMY 6807 PARKVIEW CT #102 TAMPA, FL 33604  P PETERKIN, JERALD 957 SCHOOLHOUSE RD LAKELAND, FL 33813	Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	TENTELLAKE TANK	A J. Ph.  A J. Ph.  OI N. FL.  MPA FL.  RENCE  O DAKBRE  CLAND P.	terking use RD L-338/3 terking Ave L-171 3613 :111 PS AVE L-171 33613 Hammington idge Blvb. E	Change Change Change	Addition  Addition  Addition	
NAME STREET ADDRESS CITY-S1-2IP THE NAME STREET ADDRESS CITY-S1-ZIP THE NAME STREET ADDRESS	SAM, TIMOTHY 206 WEST OREGON RD LEHIGH ACRE, FL 33936 VD SAM, ELLA J 206 WEST OREGON RD LEHIGH ACRE, FL 33936 D WILSON, ETHEL V 6807 PARKVIEW CT #102 TAMPA, FL 33604 D WILSON, JIMMY 6807 PARKVIEW CT #102 TAMPA, FL 33604 P PETERKIN, JERALD 957 SCHOOLHOUSE RD	□ Delete □ Delete □ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	TENTELLAKE TANK	A J. Ph.  A J. Ph.  OI N. FL.  MPA FL.  RENCE  O DAKBRE  CLAND P.	terking use RD L-338/3 terking Ave L-171 3613 :111 PS AVE L-171 33613 Hammington idge Blvb. E	Change Change	Addition  Addition  Addition	
NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  HITLE	SAM, TIMOTHY 206 WEST OREGON RD LEHIGH ACRE, FL 33936  VD SAM, ELLA J 206 WEST OREGON RD LEHIGH ACRE, FL 33936  D WILSON, ETHEL V 6807 PARKVIEW CT #102 TAMPA, FL 33604  D WILSON, JIMMY 6807 PARKVIEW CT #102 TAMPA, FL 33604  P PETERKIN, JERALD 957 SCHOOLHOUSE RD LAKELAND, FL 33813	Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	TETAN TAN DLAN V/CG	A J. Ph.  A J. Ph.  OI N. FL.  MPA FL.  RENCE  O DAKBRE  CLAND P.	terking use RD L 338/3 terkind Ave L-191 3613 ;111PS AVE L-191 33613 Hammington idge Blvb. E L-33	Change Change Change	Addition  Addition  Addition	

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.

SIGNATURE:

Stall Peterkin Jerald Peterkin SIGNATURE AND TYPED OR PRINTED NAME OPSIGNING OFFICER OR DIRECTOR 08-25-06 (863)709-9045

Daylime Phone #

## ATTACHMENT

#N03000004893





Goldie A Peterkin

or whom this may concera, Please Excuse aron of dark Marks on Block 11 # 3 +4 These were changes not additions. I marked off the Check marks on those two additions which were not correct. But now the checks are in the correct flace I hank you, Get 24/7 Personalized Health Information Support and More through Health Dialog

Toll-free (877) 789-2583

bcbsfl.com