

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 16, 2006 8:00 am
Secretary of State

03-16-2006 90241 012 ****61.25

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1. Entity Name

GOD'S FAMILY WORSHIP CENTER, INC.



Principal Place of Business

P.O. BOX 68
YULEE FL 32041-0068

Mailing Address

P.O. BOX 68
YULEE FL 32041-0068

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

75-3123184

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COLTRANE, PRESTON
54259 PLANTATION ROAD
CALLAHAN FL 32011

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, 2006

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 E ☐ Delete
NAME BROOKER, CONNIE
STREET ADDRESS P.O. BOX 1153
CITY-ST-ZIP YULEE FL 32041

TITLE E ☐ Delete
NAME BOYETE, SANDRA
STREET ADDRESS 5324 RESSIE DR.
CITY-ST-ZIP JACKSONVILLE FL 32218

TITLE E ☒ Delete
NAME HARRISON, DONNA
STREET ADDRESS P.O. BOX 15145
CITY-ST-ZIP FERNANDINA BEACH FL 32035

TITLE E ☐ Delete
NAME LEE, TYSON
STREET ADDRESS 1234 PLUM DR. W
CITY-ST-ZIP FERNANDINA BEACH FL 32034

TITLE E ☐ Delete
NAME TILMAN, PAT
STREET ADDRESS 1315 HICKORY TERRACE
CITY-ST-ZIP FERNANDINA BEACH FL 32034

TITLE C ☐ Delete
NAME COLTRANE, PRESTON
STREET ADDRESS 54259 PLANTATION RD
CITY-ST-ZIP CALLAHAN FL 32011

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-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:

Preston Coltrane PRESTON COLTRANE

3/15/04

(904) 879-1913