2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006638

FILED Jan 13, 2005 Secretary of State

Entity Nam	ie: EBRO ASS	SEMBLY OF GOD, INC.			•	
Current Pri	incipal Place o	of Business:	New Princ	New Principal Place of Business:		
6688 HIGH EBRO, FL						
Current Mailing Address:			New Maili	New Mailing Address:		
POST OFFI EBRO, FL						
FEI Number:	59-2872206	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
CARLTON, CHARLES 5340 WHITNEY DRIVE PANAMA CITY, FL 32405 US			5340 HEAF	HORNSBY, KAREN G 5340 HEARTLAND TRAIL EBRO, FL 32437 US		
The above in the State	named entity su of Florida.	ubmits this statement for the pu	rpose of changing it	s registered of	fice or registered agent, or both,	
SIGNATURE: KAREN HORNSBY				01/13/2005		
	Electronic	Signature of Registered Ager	nt		Date	
OFFICERS	AND DIRECT	ORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () EDIXON, DANA 6688 HIGHWAY EBRO, FL 32437		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D ()E HORNSBY, TODE 6688 HIGHWAY EBRO, FL 32437	79	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () E PHILLIPS, LEE 6688 HIGHWAY EBRO, FL 32437		Title: Name: Address: City-St-Zip:	D (X) JERNIGAN, TRA 6688 HIGHWAY EBRO, FL 3243	79	
Title: Name: Address: City-St-Zip:	D () E HAMMACK, RYAM 6688 HIGHWAY EBRO, FL 32437	79	Title: Name: Address: City-St-Zip:	D (X) SPIKES, RACHI 6688 HIGHWAY EBRO, FL 3243	79	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DANA DIXON D 01/13/2005