

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008697

FILED  
Sep 02, 2007  
Secretary of State

**Entity Name:** TRUE BELIEVER CHURCH OF GOD, INC.

**Current Principal Place of Business:**

364 S. LAKE AVE.  
PAHOKEE, FL 33476

**New Principal Place of Business:**

**Current Mailing Address:**

C/O WILLIE E. JENKINS  
P.O. BOX 279  
PAHOKEE, FL 33476

**New Mailing Address:**

**FEI Number:** 27-0112334      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

JENKINS, WILLIE E  
120 HOME PL COURT  
PAHOKEE, FL 33476      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: D      ( ) Delete  
Name: WILLIAMS, TONY  
Address: 804 PADGETT CIRCLE  
City-St-Zip: PAHOKEE, FL 33476

Title: D      ( ) Delete  
Name: BROWN, JIMMY  
Address: 732 CHERRY ROAD  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D      ( ) Delete  
Name: BRINKLEY, ALEX  
Address: 5211 STACY STREET #C  
City-St-Zip: WEST PALM BEACH, FL 33417

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: WILLIE JENKINS

OFFI

09/02/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date