## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000009423

FILED Jul 06, 2004 Secretary of State

Entity Name: GLOBAL CHURCH OF GOD BY FAITH MINISTRIES, INC.

ENTITY NAME: GLOBAL CHURCH OF GOD BY FAITH MINISTRIES, INC				
Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
7029 NW 49TH CT. FT. LAUDERDALE, FI	L 33319			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
7029 NW 49TH CT. FT. LAUDERDALE, FI	L 33319			
FEI Number: 03-0530827	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		Name and Address	Name and Address of New Registered Agent:	
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 US		PO. BOX 25836 TAMARAC. FL 33302	TAMARAC. FL 33302, FL 33320 US	
The above named enti in the State of Florida.	ity submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE: MARTIN WISE			07/06/2004	
Elect	ronic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:         PD           Name:         VOCE, ERIO           Address:         7029 NW 48           City-St-Zip:         FT. LAUDEF		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: VD Name: VOCHE, TH Address: 7029 NW 49 City-St-Zip: FT. LAUDEF		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: STD  Name: VOCE, CAR  Address: 7029 NW 48  City-St-Zip: FT. LAUDEF		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: ERIC VOCE PD 07/06/2004