## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000010557

FILED Apr 18, 2008 Secretary of State

Entity Name: GLADTIDINGS PENTECOSTAL ASSEMBLY OF POINCIANA, INC.

**Current Principal Place of Business: New Principal Place of Business:** 4545 PLEASANT HILL ROAD KISSIMMEE, FL 34759 **Current Mailing Address: New Mailing Address:** 4545 PLEASANT HILL ROAD KISSIMMEE, FL 34759 FEI Number: 02-0569122 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FARRELL, JOSEPH A FARRELL, JOSEPH A 4545 PLEÁSANT HOLL ROAD 4545 PLEÁSANT HILL ROAD KISSIMMEE, FL 34759 KISSIMMEE, FL 34759 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: JOSEPH A. FARRELL 04/18/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition FARRELL, JOSEPH A TREAS Name: Name: 4545 PLEASANT HILL ROAD Address: Address: City-St-Zip: KISSIMMEE, MA 34759 City-St-Zip: Title: () Delete Title: () Change () Addition MARTINEZ, MELODY TREAS Name: Name: Address: 462 TAMARIND PARKE LAKE Address: City-St-Zip: POINCIANA, FL 34758 City-St-Zip: Title: () Delete Title: () Change () Addition FERNELLA, AMBROSE AST TRS Name: Name: 4545 PLEASANT HILL ROAD Address: Address: City-St-Zip: KISSIMMEE, FL 34759 City-St-Zip: Title: DIR ( ) Delete Title: () Change () Addition Name: MITCHELL, GASTON S DIR Name: 616 ELBRIDGE DRIVE Address: Address: City-St-Zip: KISSIMMEE, FL 34758 City-St-Zip: Title: DIR ( ) Delete Title: () Change () Addition SYLVESTER, GILLIAN M DIR Name: Name: 325 PUFFER COURT Address: Address: City-St-Zip: KISSIMMEE, FL 34759 City-St-Zip: Title: ( ) Delete Title: () Change () Addition SMITH, KES H DIR Name: Name: Address: 506 FINCH LANE Address: KISSIMMEE, FL 34758 City-St-Zip: 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: JOSEPH A. FARRELL DIR 04/18/2008