## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000010907

FILED Mar 16, 2005 Secretary of State

Entity Name: THE POWER OF GOD FOUNDATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 652 NEUMANN VILLAGE CT OCOEE, FL 34761 **Current Mailing Address: New Mailing Address:** 652 NEUMANN VILLAGE CT OCOEE, FL 34761 FEI Number: 57-1204617 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SAINTUNY, JEAN F 652 NEUMÁNN VILLAGE CT OCOEE, FL 34761 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete () Change () Addition SAINTUNY, JEAN F Name: Name: Address: 652 NEUMANN VILLAGE CT Address: City-St-Zip: OCOEE, FL 34761 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SAINTUNY, MICHELLE Name: Address: 652 NEUMANN VILLAGE CT Address: City-St-Zip: OCOEE, FL 34761 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition JOLICOEUR, RONALD TROUILLOT, GENELUS Name: Name: 1723 MONTVIEW ST Address: Address: 1227 LINTON AVE City-St-Zip: ORLANDO, FL 32805 City-St-Zip: ORLANDO, FL 32809 Title: ( ) Delete Title: () Change () Addition Name: LEONARD, JEAN R Name: Address: 6616 LAMIRADA DR E #1 Address: City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip:

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: SAINTUNY, JEAN F PT 03/16/2005