2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400000260

FILED Apr 30, 2009 Secretary of State

Entity Name: ALPHA & OMEGA CHURCH ASSOCIATION, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 310 FITNESS CIRCLE MELBOURNE, FL 32901 **Current Mailing Address: New Mailing Address:** 310 FITNESS CIRCLE MELBOURNE, FL 32901 FEI Number: 20-0575225 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: GRIFFITHS, GEORGE A JR GRIFFITHS, GEORGE A JR 457 CLUB TRAIL 474 CLUB TRAIL MELBOURNE, FL 32901 US MELBOURNE, FL 32901 US 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: 04/30/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GRIFFITHS, GEORGE A JR Name: Name: 474 CLUB TRAIL, #4 Address: Address: MELBOURNE, FL 32901 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition MITCHELL, ERNEST Name: Name: Address: 601 W. OAKLAND PARK BLVD. Address: City-St-Zip: OAKLAND PARK, FL 33334 City-St-Zip: Title: () Delete Title: (X) Change () Addition GRIFFITHS, PRISCILLA Name: GRIFFITHS, PRISCILLA Name: 457 CLUB TRAIL, #11 Address: Address: 474 CLUB TRAIL, #4 City-St-Zip: MELBOURNE, FL 32901 City-St-Zip: MELBOURNE, FL 32901 Title: () Delete Title: () Change () Addition Name: JACKSON, PRAPAPORN Name: 310 FITNESS CIRCLE Address: Address: City-St-Zip: MELBOURNE, FL 32901 City-St-Zip: Title: () Delete Title: () Change (X) Addition COLLYMORE, RALPH Name: Name: 3074 MARTELLO DRIVE Address: Address: City-St-Zip: City-St-Zip: MARGATE, FL 33063 Title: () Delete Title: () Change (X) Addition ARCIENIGAS, SHANNAN Name: Name: Address: Address: 310 FITNESS CIRCLE MELBOURNE, FL 32901 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: GEORGE A GRIFFITHS JR P 04/30/2009