


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 08, 2006 8:00 am**  
**Secretary of State**

05-08-2006 90293 002 \*\*\*\*61.25

<b>DOCUMENT #</b> N04000000320	
<b>1. Entity Name</b> BAY STREET CHURCH OF GOD OF PROPHECY, INC.	

<b>Principal Place of Business</b> 1421 WSAT BAY STREET WINTER GARDEN, FL 34787	<b>Mailing Address</b> P.O. BOX 680634 ORLANDO, FL 32868
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<b>2. Principal Place of Business</b> 1421 East Bay Street	<b>3. Mailing Address</b> 140 BOX 770265
Suite, Apt. #, etc.	Suite, Apt. #, etc.

<b>City &amp; State</b> Winter Garden, FL	<b>City &amp; State</b> Winter Garden, FL
<b>Zip</b> 34787	<b>Zip</b> 34777
<b>Country</b> US	<b>Country</b> US



01042006 Chg-NP CR2E037 (11/05)

<b>6. Name and Address of Current Registered Agent</b> LEIGH, RICHARD A 1031 W MORSE BLVD SUITE 350 WINTER PARK, FL 32789	<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

**SIGNATURE** \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2006</b>	<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00 May Be</b> <b>Added to Fees</b>	<b>Make check payable to</b> <b>Florida Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
<b>TITLE</b> PT	<b>NAME</b> DAVIS, WILLIE J <b>STREET ADDRESS</b> P.O. BOX 680634 <b>CITY-ST-ZIP</b> ORLANDO, FL 328680634	<b>TITLE</b>	<b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>
<input type="checkbox"/> Delete		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<b>TITLE</b> T	<b>NAME</b> THOMAS, JAMES L <b>STREET ADDRESS</b> 1059 HORIZON ST <b>CITY-ST-ZIP</b> WINTER GARDEN, FL 34787	<b>TITLE</b>	<b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>
<input type="checkbox"/> Delete		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<b>TITLE</b> T	<b>NAME</b> MARSHALL, ERROL <b>STREET ADDRESS</b> 14810 SLIPIN RD <b>CITY-ST-ZIP</b> WINTER GARDEN, FL 34787	<b>TITLE</b>	<b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>
<input type="checkbox"/> Delete		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<b>TITLE</b>	<b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<b>TITLE</b>	<b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>
<input type="checkbox"/> Delete		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<b>TITLE</b>	<b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<b>TITLE</b>	<b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>
<input type="checkbox"/> Delete		<input type="checkbox"/> Change	<input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

**SIGNATURE:** *James Chanar*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-06 321-297-1203  
Date Daytime Phone #