2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400000820

FILED Apr 28, 2005 Secretary of State

Entity Name: FLORIDA GOSPEL SINGING CONVENTION, INC

Current Principal Place of Business: New Principal Place of Business: 324 WEST DADE AVENUE BUSHNELL, FL 33513 **Current Mailing Address: New Mailing Address:** 324 WEST DADE AVENUE BUSHNELL, FL 33513 FEI Number: 20-1331685 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: HARRISON, MARY G 324 WEST DADE AVENUE BUSHNELL, FL 33513 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: (X) Change () Addition () Delete JOYNER, WILLIAM H SWINDLE, JESSE C Name: Name: 3174 WOOD VALLEY ROAD Address: 1101 E NEBRASKA Address: City-St-Zip: PANAMA CITY, FL 32405 City-St-Zip: BONIFAY, FL 32425 Title: Title: T/D (X) Change () Addition () Delete DEAS, ALBERT Name: BROWNELL, JOHN Name: Address: 4040 CR 146 NW Address: 703 HOLMES ROAD City-St-Zip: JENNINGS, FL 32053 City-St-Zip: WESTVILLE, FL 32464 Title: (X) Delete Title: () Change () Addition FORTNER, VIRGINIA C Name: Name: 795 SHADY LANE Address: Address: City-St-Zip: BARTOW, FL 33830 City-St-Zip: Title: () Delete Title: () Change () Addition Name: HARRISON, MARY G Name: 324 WEST DADE AVENUE Address: Address: City-St-Zip: BUSHNELL, FL 33513 City-St-Zip: Title: (X) Delete Title: () Change () Addition WILLIAMS, MARTHA Name: Name: P. O. BOX 241 Address: Address: City-St-Zip: BUSHNELL, FL 33513 City-St-Zip: Title: (X) Delete Title: () Change () Addition JAMES, LUEDEEN Name: Name: Address: 5149 EL ADOBE DRIVE Address: LEESBURG, FL 34748 City-St-Zip: 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: MARY G. HARRISON D 04/28/2005