2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 17, 2006 8:00 am Secretary of State DOCUMENT # N04000004582 1. Entity Name 02-17-2006 90076 011 ****61.25 SOUL REFRESHING CHURCH OF GOD IN CHRIST, INC. Principal Place of Business Mailing Address 900 GEORGE ENGRAM BLVD. 900 GEORGE ENGRAM BLVD. DAYTONA BCH FL 32114 DAYTONA BCH FL 32114 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 75-3156821 Not Applicable Zip Country _ Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent EADY, ROSA Street Address (P.O. Box Number is Not Acceptable) 433 WALKER AVE. DAYTONA BCH FL 32114 City Zip Code 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 FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2006 Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Addition ☐ Delete TITLE ☐ Change WILDER, ALLEN NAME NAME 711 ESSEX RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DAYTONA BCH FL 32117 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition WILDER, ERNESTINE NAME NAME 711 ESSEX RD. STREET ADDRESS STREET ADDRESS DAYTONA BCH FL 32117 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition EADY, ROSA NAME STREET ADDRESS 433 WALKER AVE. STREET ADDRESS DAYTONA BCH FL 32114 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition BROWN, TERRY NAME NAME STREET ADDRESS 1206 SUNSET CIR. STREET ADDRESS CITY-ST-ZIP DAYTONA BCH FL 32117 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition egory w. Brown NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-2IP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Kosa Endu

2-6-06

386-226-2329

FILED