


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 08:00 A
Secretary of State

DOCUMENT # N04000005362

1. Entity Name
 BOYNTON BEACH CHURCH OF GOD OF PROPHECY CORP



Principal Place of Business
 500 E GULFSTREAM BLVD
 BOYNTON BCH, FL 33426

Mailing Address
 1250 S W 10TH TERR
 DEERFIELD BCH, FL 33441

DO NOT WRITE IN THIS SPACE



01252007 No Chg-NP CR2E037 (4/06)

4. FEI Number
 NOT APPLICABLE

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FRANCIS, SIMON
 1250 SW 10TH TERR
 DEERFIELD BCH, FL 33441

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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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

Filing Fee is \$61.25 Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	FEANCIS, SIMON
STREET ADDRESS	1250 S.W. 10TH TERRACE
CITY-ST-ZIP	DEERFIELD BCH, FL 33441
TITLE	P
NAME	LEWIS, LINCOLN
STREET ADDRESS	2058 PINEHAIR ST DR
CITY-ST-ZIP	W PALM BCH, FL 33407
TITLE	D
NAME	ROBINSON, DWANE
STREET ADDRESS	207 LIBERTY CT
CITY-ST-ZIP	DEERFIELD BCH, FL 33442
TITLE	P
NAME	WHITELY, IONA
STREET ADDRESS	6006 TRIPHAMMER RD
CITY-ST-ZIP	LAKEWORTH, FL 33463
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: *Francis Simon* **Francis Simon** 4 10 2007
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #