

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 19, 2005
Secretary of State**

DOCUMENT# N04000005799

Entity Name: THE CHURCH OF GOD OF PHOPHECY - MONTICELLO, FL, INC.

Current Principal Place of Business:

405 MARTIN LUTHER KING JR AVE
MONTICELLO, FL 32344

New Principal Place of Business:

Current Mailing Address:

233 MARTIN RD
MONTICELLO, FL 32344

New Mailing Address:

FEI Number: 59-2863529 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN-POTTER, MONIQUE
39 STARLING TRACE
CRAWFORDVILLE, FL 32327 US

Name and Address of New Registered Agent:

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:

Title: PT () Delete
Name: BROWN, HORACE
Address: 6114 PETTIFORD DR W
City-St-Zip: JACKSONVILLE, FL 32209

Title: T/T () Delete
Name: BROWN, JOSPEH
Address: 233 MARTIN RD
City-St-Zip: MONTICELLO, FL 32344

Title: T () Delete
Name: GRENNE, ZELLA
Address: 445 MARTIN LUTHER KING JR AVE
City-St-Zip: MONTICELLO, FL 32344

Title: T () Delete
Name: MASSEY, MARTHA
Address: 725 N RAILROAD ST
City-St-Zip: MONTICELLO, FL 32344

Title: T () Delete
Name: CUMMINGS, TIAWANDA
Address: 875 GOLDBURG ST
City-St-Zip: MONTICELLO, FL 32344

Title: T () Delete
Name: DAVIS, ANNIE
Address: 12573 FORESTRUN DR
City-St-Zip: TALLAHASSEE, FL 32317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: GREENE, ZELLA
Address: 445 MARTIN LUTHER KING JR AVE
City-St-Zip: MONTICELLO, FL 32344

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: MONIQUE BROWN-POTTER

RA

04/19/2005

Electronic Signature of Signing Officer or Director

Date