

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005799

FILED  
Apr 27, 2011  
Secretary of State

**Entity Name:** THE CHURCH OF GOD OF PROPHECY - 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:**

39 STARLING TRACE  
CRAWFORDVILLE, FL 32327

**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  
Name: BROWN, HORACE  
Address: 6114 PETTIFORD DR W  
City-St-Zip: JACKSONVILLE, FL 32209

Title: T/T  
Name: BROWN, GLORIA  
Address: 6114 PETTIFORD DR W  
City-St-Zip: JACKSONVILLE, FL 32209

Title: T  
Name: WILCOX, IDA  
Address: 656 AUCILLA HWY  
City-St-Zip: MONTICELLO, FL 32344

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

Title: T  
Name: GAVIN, BETTY  
Address: 419 JAY CT  
City-St-Zip: TALLAHASSEE, FL 32305

Title: T  
Name: BROWN, MARVIN  
Address: 8827 CUMBRIA CT  
City-St-Zip: JACKSONVILLE, FL 32219

I hereby 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 all other like empowered.

SIGNATURE: MONIQUE BROWN-POTTER

RA

04/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date