

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N04000006458

1. Entity Name
GOD'S NATION OF REALITY CHRISTIAN
NETWORK/OUTREACH ORGANIZATION INC.



Principal Place of Business
10065 N.W. 7TH AVENUE
MIAMI, FL 33150

Mailing Address
18367 N.W. 27TH AVENUE
PMB 19
MIAMI, FL 33056

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02022006

Chg-NP

CR2E037 (11/05)

4. FEI Number
20-1308023

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BLACKMAN, CONSTANCE C
1420 NW 75TH STREET
MIAMI, FL 33147

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE F/CD
NAME WHISBY, ROBERT ☐ Delete
STREET ADDRESS 4319 N.W. 16TH AVENUE
CITY-ST-ZIP MIAI, FL 33142

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD
NAME BLACKMAN, CONSTANCE ☐ Delete
STREET ADDRESS 1420 NW 75TH STREET
CITY-ST-ZIP MIAMI, FL 33147

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD
NAME PALACIOUS, ALTHEA J ☐ Delete
STREET ADDRESS 9121 N.W. 16TH AVENUE
CITY-ST-ZIP MIAMI, FL 33147

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD
NAME PALACIOUS, ADRIANNE ☐ Delete
STREET ADDRESS 9121 N.W. 16TH AVENUE
CITY-ST-ZIP MIAMI, FL 33147

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD
NAME OGBURN, CHARLES ☒ Delete
STREET ADDRESS 7734 N.W. 10TH AVENUE
CITY-ST-ZIP MIAMI, FL 33150

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD
NAME ECHOLES, TAJ ☐ Delete
STREET ADDRESS 1420 NW 75TH STREET
CITY-ST-ZIP MIAMI, FL 33147

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Althea J. Palacios

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1

Daytime Phone #

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