

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2007 8:00 am
Secretary of State

01-11-2007 90052 023 ****61.25

DOCUMENT # N04000006587

1. Entity Name
CHARISMATA CHURCH OF GOD, INC.



Principal Place of Business
**17891 SOUTH DIXIE HWY STE 200
MIAMI, FL 33157**

Mailing Address
**17891 SOUTH DIXIE HWY STE 200
MIAMI, FL 33157**



2. Principal Place of Business - No P.O. Box #

17891 South Dixie Hwy

Suite, Apt. #, etc.

Suite 200

City & State

Miami FL

Zip

33157

Country

U.S.A

3. Mailing Address

17891 South Dixie Hwy

Suite, Apt. #, etc.

Suite 200

City & State

Miami FL

Zip

33157

Country

U.S.A

01042007 Chg-NP

CR2E037 (12/06)

4. FEI Number
36-4557623

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BINGHAM, BRENDALEE
17891 SOUTH DIXIE HWY
STE 200
MIAMI, FL 33157**

7. Name and Address of New Registered Agent

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

Brendalee Bingham

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

01-4-2007

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

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **SIMMS, CORNEL**
STREET ADDRESS **1250 SE 31ST CT UNIT 103**
CITY-ST-ZIP **HOMESTEAD, FL 33035**

TITLE **DA** ☐ Delete
NAME **CHAMBER, DAWN**
STREET ADDRESS **17891 SOUTH DIXIE HWY**
CITY-ST-ZIP **MIAMI, FL 33157**

TITLE **DA** ☐ Delete
NAME **WALDEN, HUGHLAN**
STREET ADDRESS **17891 SOUTH DIXIE HWY**
CITY-ST-ZIP **MIAMI, FL 33157**

TITLE **D** ☒ Delete
NAME **ROGHUNANDUN, PHILLIP**
STREET ADDRESS **17891 SOUTH DIXIE HWY**
CITY-ST-ZIP **MIAMI, FL 33157**

TITLE **DA** ☐ Delete
NAME **LEWIS, MARCIA**
STREET ADDRESS **17891 SOUTH DIXIE HWY**
CITY-ST-ZIP **MIAMI, FL 33157**

TITLE **DA** ☐ Delete
NAME **COATES, DAISEY**
STREET ADDRESS **17891 SOUTH DIXIE HWY**
CITY-ST-ZIP **MIAMI, FL 33157**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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:

Cornel Simms

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/08/07 305-971-3424

Date

Daytime Phone #