

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008722

FILED
Feb 04, 2007
Secretary of State

Entity Name: GREATER DIMENSIONS CHRISTIAN ASSEMBLY DUNNELLON, INC.

Current Principal Place of Business:

19120 E. PENNSYLVANIA AVE
SUITE B
DUNNELLON, FL 34432

New Principal Place of Business:

Current Mailing Address:

19120 E. PENNSYLVANIA AVE
SUITE B
DUNNELLON, FL 34432

New Mailing Address:

FEI Number: 20-1488149

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICHARDSON, ALEC D
8266 SW 135TH ST RD
OCALA, FL 34473 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: P () Delete
Name: RICHARDSON, ALEC D
Address: 8266 SW 135TH ST RD
City-St-Zip: OCALA, FL 34473

Title: TREA () Delete
Name: CHESTNUT, EDWARD
Address: 190 E AMBASSADOR LN
City-St-Zip: OCALA, FL 34434

Title: SEC () Delete
Name: JAMES, BERNARD
Address: 21389 SW 102 ST. RD
City-St-Zip: DUNNELLON, FL 34431

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: MEMB () Change (X) Addition
Name: MICHAEL, ALLEN
Address: 170 LATERINO COURT
City-St-Zip: CASSELBERRY, FL 32730

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: ALEC RICHARDSON

P

02/04/2007

Electronic Signature of Signing Officer or Director

Date