2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008847

FILED May 19, 2009 Secretary of State

Entity Name: THE REDEEMED CHRISTIAN CHURCH OF GOD, STRONGTOWER PARISH INC.

Current Principal Place of Business: 8312 W.OAKLAND PARK BLVD, SUNRISE, FL 33351 US			New Principal Place of Business:		
Current Mailing Address:			New Mailing Address:		
16261 NW 57TH AVENUE MIAMI, FL 33014 US					
FEI Number: 20-1759367 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
OGALI, CHI 6249 NW 11 MIAMI, FL	RIS E 90TH TERRAC 33015 US	CE			
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: Floatrania Signature of Registered Agent				Data	
Electronic Signature of Registered Agent OFFICERS AND DIRECTORS:			Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:		Delete E TERRACE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () OGALI, UDEAKU 6249 NW 190TH MIAMI, FL 3301	TERR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () AKINNIBI, OLAW 660 NW 177 ST MIAMI, FL 3316	REET	Title: Name: Address: City-St-Zip:	D (X) Change () Addition ALALADE, OLUROTIMI 700 NW 214TH STREET APT. 118 MIAMI, FL 33169 US	
Title: Name: Address: City-St-Zip:	D () ODUNLAMI, ADU 5660 NW 187TH OPALOCKA, FL	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition ALALADE, OMOWUNMI 700 NW 214TH STREET APT.118 MIAMI, FL 33169 US	

I hereby certify that the information supplied with this filing does not qualify 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: PASTOR CHRIS E OGALI PD 05/19/2009