2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04143

FILED Feb 08, 2010 Secretary of State

Entity Name: SAINT CITY NO. 2 CHURCH OF GOD OF THE APOSTOLIC FAITH, INC.

Current Principal Place of Business: New Principal Place of Business:

9302 NW 22ND AVE 9302 & 4922 NW 22 AVE CROSS CITY, FL 32628 US MIAMI, FL 33147 US

Current Mailing Address: New Mailing Address:

7375 N. AUGUSTA DR CO BISHOP JENKINS HIALEAH, FL 33015

FEI Number: 59-2222883 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JENKINS, JAMES P 7375 N. AUGUSTA DR MIAMI, FL 33015 US

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: DP

 Name:
 JENKINS, JAMES P

 Address:
 7375 N. AUGUSTA DR

 City-St-Zip:
 MIAMI, FL 33015

Title: VD

Name: JENKINS, HELEN Address: 7375 N. AUGUSTA DR City-St-Zip: MIAMI, FL 33015

Title:

Name: HOWARD, MICHAEL Address: 16100 NW 17 PLACE City-St-Zip: MIAMI, FL 33054

Title:

Name: YOUNG, EARL

Address: 6448 N.W. 61ST STREET
City-St-Zip: OCALA, FL 34482

Title:

 Name:
 YOUNG, GENISE

 Address:
 6448 N.W. 61ST STREET

 City-St-Zip:
 OCALA, FL 34482

Title: [

Name: PORTER, REGINA
Address: 1217 BERTHAD TASS
City-St-Zip: HEPHZIDAH, GA 30815

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: JAMES P JENKINS PD 02/08/2010