

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N05000000714

1. Entity Name
PROMISE CHURCH OF THE LIVING GOD
INTERNATIONAL INC.



Principal Place of Business
151 EGLIN PARKWAY NE UNIT A
FT WALTON BEACH, FL 32548

Mailing Address
151 EGLIN PARKWAY NE UNIT A
FT WALTON BEACH, FL 32548

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01242005

Chg-NP

CR2E037 (10/03)

4. FEI Number
APPLIED FOR

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRICKHOUSE, JULIA
2411 SUWANEE LANE
FT WALTON BEACH, FL 32547

7. Name and Address of New Registered Agent

Name Julia Brickhouse
Street Address (P.O. Box Number is Not Acceptable)
322 Brookwood Blvd

City Fort Mary Esther FL Zip Code 32569

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, 2005

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 SMITH, CHARLES D
STREET ADDRESS 151 EGLIN PARKWAY NE UNIT A
CITY-ST-ZIP FT WALTON BEACH, FL 32548

TITLE AP ☐ Delete
NAME SMITH, PAULA J
STREET ADDRESS 151 EGLIN PARKWAY NE UNIT A
CITY-ST-ZIP FT WALTON BEACH, FL 32548

TITLE S ☐ Delete
NAME BRICKHOUSE, JULIA
STREET ADDRESS 151 EGLIN PARKWAY NE UNIT A
CITY-ST-ZIP FT WALTON BEACH, FL 32548

TITLE T ☐ Delete
NAME WILLIAMS, RICHARD
STREET ADDRESS 151 EGLIN PARKWAY NE UNIT A
CITY-ST-ZIP FT WALTON BEACH, FL 32548

TITLE T ☒ Delete
NAME THOMAS, DARREN
STREET ADDRESS 151 EGLIN PARKWAY NE UNIT A
CITY-ST-ZIP FT WALTON BEACH, FL 32548

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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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NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
2005 FEB - 7 P 2:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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05/10/04--60020--005 **153.75

2/2/05 850-240-3634