

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002233

FILED  
Apr 24, 2006  
Secretary of State

**Entity Name:** HOMESTEAD COMMUNITY CHURCH OF GOD INC.

**Current Principal Place of Business:**

140 NE 19TH STREET  
HOMESTEAD, FL 33030

**New Principal Place of Business:**

**Current Mailing Address:**

140 NE 19TH STREET  
HOMESTEAD, FL 33030

**New Mailing Address:**

**FEI Number:** 20-2475217

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CODLING, LINFORD  
9635 SW 181 TERRACE  
MIAMI, FL 33157 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: CD ( ) Delete  
Name: AJEI, KWAKU  
Address: 17168 SW 144 PLACE  
City-St-Zip: MIAMI, FL 33176

Title: CD ( ) Delete  
Name: HODGE-GOMES, MAUREEN  
Address: 15957 SW 95TH AVE., STE. 26  
City-St-Zip: MIAMI, FL 33156

Title: DT ( ) Delete  
Name: CODLING, YVONNE  
Address: 1873 SE 20 TERRACE  
City-St-Zip: HOMESTEAD, FL 33031

Title: DS ( ) Delete  
Name: MOITT, JANICE  
Address: 140 NE 19 STREET  
City-St-Zip: HOMESTEAD, FL 33030

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

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: YVONNE CODLING

DT

04/24/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date