2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003827

Entity Name: UNITY GOSPEL C.O.G.I.C. INC.

FILED Apr 14, 2008 Secretary of State

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

905 NW 68TH PLACE OCALA, FL 34475

Current Mailing Address: New Mailing Address:

905 NW 68TH PLACE OCALA, FL 34475

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

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

A1A REGISTERED AGENT INC. 5647 110TH AVE. NORTH ROYAL PALM BEACH, FL 334110000 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:

Floring Complete of Decision of Asset

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 DP
 () Delete

 Name:
 PULLINGS, ELIJAH M

 Address:
 905 NW 68TH PLACE

 City-St-Zip:
 OCALA, FL 34475

Title: DV () Delete Name: PULLINGS, NORA J

Name: PULLINGS, NORA J
Address: 905 NW 68TH PLACE
City-St-Zip: OCALA, FL 34475

 Title:
 DT
 () Delete

 Name:
 HAMILTON, NORMA J

 Address:
 6185 NW 68TH AVE RD

 City-St-Zip:
 OCALA, FL 34482

 Title:
 S
 () Delete

 Name:
 PULLINGS, LATOSHA S

 Address:
 905 NW 68TH PLACE

 City-St-Zip:
 OCALA, FL 34475

Title: DP (X) Change () Addition

Name: PULLINGS, ELIJAH M Address: 905 NW 68TH PLACE City-St-Zip: OCALA, FL 34475 US

Title: DV (X) Change () Addition

Name: PULLINGS, NORA J Address: 905 NW 68TH PLACE City-St-Zip: OCALA, FL 34475 US

Title: DT (X) Change () Addition

Name: HARRIS, LATOSHA S Address: 1250 NE 39TH RD City-St-Zip: OCALA, FL 34470 US

Title: S (X) Change () Addition

Name: PULLINGS, SHAKAYLA R Address: 905 NW 68TH PLACE City-St-Zip: OCALA, FL 34475

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: REV. ELIJAH M. PULLINGS DP 04/14/2008