

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005299

FILED  
May 01, 2006  
Secretary of State

Entity Name: CARMEL GOSPEL HALL CREW, INC.

## Current Principal Place of Business:

3399 FOXCROFT RD.  
105  
MIRAMAR, FL 33025

## New Principal Place of Business:

9965 MIRAMAR PARKWAY  
293  
MIRAMAR, FL 33025

## Current Mailing Address:

3399 FOXCROFT RD.  
105  
MIRAMAR, FL 33025

## New Mailing Address:

9965 STEPS HOLDINGS LLC  
293  
MIRAMAR, FL 33025

FEI Number: 83-0430639      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:

MCCALLA, FLO  
3399 FOXCROFT RD.  
105  
MIRAMAR, FL 33025 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: P ( ) Delete  
Name: MCCALLA, FLO  
Address: 3399 FOXCROFT RD.  
City-St-Zip: MIRAMAR, FL 32205

Title: DIR ( ) Delete  
Name: TOMLINSON, WAYNE  
Address: 8552 CLARIDGE DR.  
City-St-Zip: MIRAMAR, FL 33025

Title: DIR ( ) Delete  
Name: MUNDY, DONNA  
Address: 3061 WINDWARD WAY  
City-St-Zip: MIRAMAR, FL 33025

Title: DIR ( ) Delete  
Name: EDWARDS, SHELDON  
Address: 10550 SUNSET STRIP  
City-St-Zip: SUNRISE, FL 33322

## 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: FLO MCCALLA

P

05/01/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date