2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005493

FILED Apr 29, 2009 Secretary of State

Entity Name: FAMILY OF GOD COMMUNITY CHURCH INCORPORATED

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

950 NORTH COCOA BLVD SUITE 105 COCOA, FL 32922

New Mailing Address: Current Mailing Address:

950 NORTH COCOA BLVD SUITE 105 COCOA, FL 32922

FEI Number: 59-3591730 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

OSDRAS, MARK A REVERAN 950 NORTH COCOA BLVD SUITE 105 COCOA, FL 32922 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PRES (X) Change () Addition () Delete ABELL, RENEE C KLIEBENSTEIN, SUSAN M Name: Name: 950 N. COCOA BIRD STE. 105 Address: 950 N. COCOA BIRD STE. 105 Address: City-St-Zip: COCOA, FL 32922 US City-St-Zip: COCOA, FL 32922 US

Title: () Delete Title: () Change () Addition

GARDINER, POLLY Name: Name: Address: 950 N. COCOA BLVD., STE. 105 Address: City-St-Zip: COCOA, FL 32922 US City-St-Zip:

Title: () Delete Title: (X) Change () Addition

PLUM, WILLIAM JALETTE, DANIEL J Name: Name:

1359 NIMITE CT Address: Address: 950 N. COCOA BLVD., STE 105

City-St-Zip: ROCKLEDGE, FL 32955 US City-St-Zip: COCOA, FL 32922 US

Title: **TRES** () Delete Title: **TRES** (X) Change () Addition Name: WALKER, DON Name: WALKER, DON

Address: 1372 HALEN LN Address: 950 N. COCOA BLVD., STE 105 City-St-Zip: ROCKLEDGE, FL 32955 US City-St-Zip: COCOA, FL 32922 US

Title: TRUS () Delete Title: TRUS (X) Change () Addition

STONE, MARY RYCZER, LUCILLE A Name: Name:

2950 MATTHEW DR. 950 N. COCOA BLVD., STE 105 Address: Address:

City-St-Zip: ROCKLEDGE, FL 32955 US City-St-Zip: COCOA, FL 32922 US

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: RENEE C. ABELL ADMI 04/29/2009

Electronic Signature of Signing Officer or Director

Date