2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005750

FILED Jan 04, 2007 Secretary of State

Entity Name: EBEN-EZER MISSIOMAIR CHURCHS DE OCALA, INC.

Current P	Principal Place of Business:	New Principal Place o	of Business:
800 SW : DCALA, F			
urrent N	lailing Address:	New Mailing Address	:
06 BAHIA DCALA, F			
El Number	: FEI Number Applie	ed For (X) FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of Current Registere	d Agent: Name and Address of	New Registered Agent:
06 BAHİ	ALBERT REV. A CIRCLE INN IL 34472 US		
	e named entity submits this staten e of Florida.	nent for the purpose of changing its registered	I office or registered agent, or both,
the Stat	e of Florida.	nent for the purpose of changing its registered	l office or registered agent, or both,
the Stat	e of Florida.		I office or registered agent, or both, Date
n the Stat SIGNATU	e of Florida. [*] RE:	egistered Agent	
the Stat	e of Florida. RE: Electronic Signature of Re	egistered Agent ADDITIONS/CHANGE	Date
the Stat IGNATU PFFICER ttle: ame: ddress: ity-St-Zip: ttle: ame: ddress:	e of Florida. RE: Electronic Signature of Re S AND DIRECTORS: D () Delete DESOLME, TIMOTHEE PASTOR 18 MIDWAY COURT	egistered Agent ADDITIONS/CHANGE Title: Name: Address: City-St-Zip:	Date S TO OFFICERS AND DIRECTORS
n the Stat GNATU FFICER itle: ame: ddress:	e of Florida. RE: Electronic Signature of Re S AND DIRECTORS: D () Delete DESOLME, TIMOTHEE PASTOR 18 MIDWAY COURT OCALA, FL 34474 D () Delete FLORVILUS, ELIZIN 4 PEACAN PASS DR	egistered Agent ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	Date S TO OFFICERS AND DIRECTORS () Change () Addition

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: ALBERT JOSEPH REV 01/04/2007