

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 17, 2006
Secretary of State**

DOCUMENT# N05000006143

Entity Name: ALPHA AND OMEGA WORSHIP CENTER INC

Current Principal Place of Business:

112 E MAPLE ST
DAVENPORT, FL 33837

New Principal Place of Business:

Current Mailing Address:

PO BOX 474
DAVENPORT, FL 33837

New Mailing Address:

FEI Number: 20-2706375 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARRERO, HECTOR A JR
112 E MAPLE ST
DAVENPORT, FL 33837 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: P () Delete
Name: MARRERO, LUIS A JR
Address: 112 E MAPLE ST
City-St-Zip: DAVENPORT, FL 33837

Title: VP () Delete
Name: RODRIGUEZ, LUIS
Address: PO BOX 3156
City-St-Zip: DAVENPORT, FL 33836

Title: T () Delete
Name: RODRIGUEZ, BLANCA
Address: PO BOX 3156
City-St-Zip: DAVENPORT, FL 33836

Title: S () Delete
Name: MARRERO, DEBORAH
Address: PO BOX 3156
City-St-Zip: DAVENPORT, FL 33836

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MARRERO, HECTOR A JR
Address: 112 E MAPLE ST
City-St-Zip: DAVENPORT, FL 33837

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

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

Title: S (X) Change () Addition
Name: MARRERO, DEBORAH
Address: PO BOX 474
City-St-Zip: DAVENPORT, FL 33836

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: HECTOR A.MARRERO JR.

P

04/17/2006

Electronic Signature of Signing Officer or Director

_____ Date