## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000006288

FILED Mar 22, 2007 Secretary of State

Entity Name: GOD'S TEMPLE FOR ALL PEOPLE MINISTRIES, INC.

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

8 SWEET ST HAVANA, FL 32333

Current Mailing Address: New Mailing Address:

P. O. BOX 16493 P. O. BOX 16493

TALLAHASSEE, FL 323086493 TALLAHASSEE, FL 323176493

FEI Number: 59-3809369 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:

LEONARD, LIONEL

1738 HILLSGATE CT

TALLAHASSEE, FL 32308 US

LEONARD, LIONEL

1738 HILLSGATE COURT

TALLAHASSEE, FL 32308 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: LIONEL LEONARD 03/22/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition LEONARD, LIONEL LEONARD, LIONEL Name: Name: 1738 HILLSGATE CT Address: 1738 HILLSGATE COURT Address: City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip: TALLAHASSEE, FL 32308 Title: DS () Delete Title: () Change () Addition LEWIS, CHARLENE Name: Name: Address: 508 FAMCEE AVENUE Address: City-St-Zip: TALLAHASSEE, FL 32310 City-St-Zip: Title: DT () Delete Title: () Change () Addition GLENN, AUDREY Name: Name: 407 LINCOLN AVE Address: Address: City-St-Zip: HAVANA, FL 32333 City-St-Zip: Title: ( ) Delete Title: () Change () Addition GREEN, CLAUDETTE Name: Name: 20 HINSON CIRCLE Address: Address: City-St-Zip: HAVANA, FL 32333 City-St-Zip: Title: Title: () Delete () Change () Addition JOHNSON, DAISY Name: Name: 2907 BEAVER CREEK DRIVE Address: Address: City-St-Zip: HAVANA, FL 32333 City-St-Zip:

Title: ( ) Delete Title: D ( ) Change (X) Addition Name: LEONARD, BARBARA

 Name:
 Name:
 LEONARD, BARBARA

 Address:
 Address:
 1738 HILLSGATE COURT

 City-St-Zip:
 City-St-Zip:
 TALLAHASSEE, FL 32308

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: LIONEL LEONARD C 03/22/2007