

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008221

FILED
May 01, 2006
Secretary of State

Entity Name: CHURCH OF THE SOVEREIGN GOD CORP

Current Principal Place of Business:

P. O. BOX 89111
TAMPA, FL 33689 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 89111
TAMPA, FL 33689 US

New Mailing Address:

FEI Number: 20-3290123 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:

MATTHEWS, JAMES
3515 VILLAGE BLVD.
SUITE 205
WEST PALM BEACH, FL 33409 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: D/P () Delete
Name: FAULKNER, BENJAMIN W JR.
Address: 1301 IVYWOOD DRIVE
City-St-Zip: BRANDON, FL 33510

Title: DVP () Delete
Name: HAUGHEE, CHARLES E
Address: 7360 HIAWATHA
City-St-Zip: SPRING HILL, FL 34606

Title: DVP () Delete
Name: FINNEY, JOHN E JR.
Address: 13970 140TH STREET
City-St-Zip: LIVE OAK, FL 32060

Title: D/S () Delete
Name: PETERSON, REGINALD J
Address: 9812 SW 14TH STREET
City-St-Zip: DAVIE, FL 33324

Title: D/T () Delete
Name: MATTHEWS, JAMES
Address: 3515 VILLAGE BLVD # 205
City-St-Zip: WEST PALM BEACH, FL 33409

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:

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: JAMES MATTHEWS

D/T

05/01/2006

Electronic Signature of Signing Officer or Director

Date