

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001188

FILED
Feb 11, 2010
Secretary of State

Entity Name: NORTHSIDE ASSEMBLY OF GOD, BONIFAY, FL, INC.

Current Principal Place of Business:

1009 N. RANGELINE STREET
BONIFAY, FL 32425

New Principal Place of Business:

Current Mailing Address:

1009 N. RANGELINE STREET
BONIFAY, FL 32425

New Mailing Address:

FEI Number: 59-3757547

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELL, EDWIN G
1897 HWY. 173
BONIFAY, FL 32425 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
Name: BELL, EDWIN G
Address: 1897 HWY. 173
City-St-Zip: BONIFAY, FL 32425

Title: D/TR
Name: HAUSNER, ROBERT
Address: 1237 PARRISH RD
City-St-Zip: BONIFAY, FL 32425

Title: D
Name: ATKINS, DWAYNE
Address: 310 EAST WISCONSIN AVENUE
City-St-Zip: BONIFAY, FL 32425

Title: D
Name: KELLEY, RICHARD
Address: 1527 HWY. 173
City-St-Zip: GRACEVILLE, FL 32440

Title: D
Name: WILLIAMS, ANDREW
Address: 1542 SMITH LANE
City-St-Zip: BONIFAY, FL 32425

Title: D
Name: KOLMETZ, NICK
Address: 1895 HWY 173
City-St-Zip: BONIFAY, FL 32425

I hereby 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 all other like empowered.

SIGNATURE: EDWIN G. BELL

D/P

02/11/2010

Electronic Signature of Signing Officer or Director

Date