

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001222

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: CHURCH OF RESTORATION REBORN INC.

## Current Principal Place of Business:

400 CAHOON RD.  
JACKSONVILLE, FL 32220

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 7067  
JACKSONVILLE, FL 32238

## New Mailing Address:

FEI Number: 84-1686387

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RIVERA, PRISCILLA L  
7929 STUART AVE  
JACKSONVILLE, FL 32220 US

## Name and Address of New Registered Agent:

RIVERA, PRISCILLA L  
8822 ROCKPOND MEADOWS DR.  
JACKSONVILLE, FL 32221 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: PRISCILLA L. RIVERA

04/30/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: ROBLES, JOSE A  
Address: 7929 STUART AVE  
City-St-Zip: JACKSONVILLE, FL 32220

Title: D ( ) Delete  
Name: ROBLES, CARMEN  
Address: 7929 STUART AVE  
City-St-Zip: JACKSONVILLE, FL 32220

Title: TD ( ) Delete  
Name: ROBLES, ANGEL L  
Address: 9717 PEABODY DR N  
City-St-Zip: JACKSONVILLE, FL 32221

Title: YD ( ) Delete  
Name: MILIAN, WILLIAM MINISTE  
Address: 7138 RICKER RD  
City-St-Zip: JACKSONVILLE, FL 32244

Title: D ( ) Delete  
Name: RIVERA, HECTOR  
Address: 7929 STUART AVE  
City-St-Zip: JACKSONVILLE, FL 32220

Title: SD ( ) Delete  
Name: RIVERA, PRISCILLA L  
Address: 7929 STUART AVE  
City-St-Zip: JACKSONVILLE, FL 32220

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: ROBLES, JOSE A  
Address: 8822 ROCKPOND MEADOWS DR.  
City-St-Zip: JACKSONVILLE, FL 32221

Title: D (X) Change ( ) Addition  
Name: ROBLES, CARMEN  
Address: 8822 ROCKPOND MEADOWS DR.  
City-St-Zip: JACKSONVILLE, FL 32221

Title: TD (X) Change ( ) Addition  
Name: ROBLES, ANGEL L  
Address: 9717 PEABODY DR N  
City-St-Zip: JACKSONVILLE, FL 32221

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

Title: D (X) Change ( ) Addition  
Name: RIVERA, HECTOR  
Address: 8822 ROCKPOND MEADOWS DR.  
City-St-Zip: JACKSONVILLE, FL 32221

Title: SD (X) Change ( ) Addition  
Name: RIVERA, PRISCILLA L  
Address: 8822 ROCKPOND MEADOWS DR.  
City-St-Zip: JACKSONVILLE, FL 32221

I hereby certify that the information supplied with this filing does not qualify 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: PRISCILLA L. RIVERA

SD

04/30/2007

Electronic Signature of Signing Officer or Director

Date