

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003927

FILED
Apr 18, 2007
Secretary of State

Entity Name: NEW REDEEMED CHURCH OF GOD IN CHRIST, INC

Current Principal Place of Business:

2771 & 2777 MAYPORT RD
ATLANTIC BEACH, FL 32233

New Principal Place of Business:

Current Mailing Address:

2771 & 2777 MAYPORT RD
ATLANTIC BEACH, FL 32233

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMP, STEVEN N
12578 COUNTRY CHARM LN N
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

CAMP, STEVEN N
6980 LAFAYETTE PARK DR
JACKSONVILLE, FL 32244 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:

04/18/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TRUS () Delete
Name: MILLINER, WAYNE PASTOR
Address: 14109 BEACH BLVD LOT 923
City-St-Zip: JACKSONVILLE, FL 32250

Title: TRUS () Delete
Name: MILLINER, GAIL AA
Address: 14109 BEACH BLVD LOT 923
City-St-Zip: JACKSONVILLE, FL 32250

Title: TRUS () Delete
Name: CAMP, STEVEN N CDB
Address: 12578 COUNTRY CHARM LN N
City-St-Zip: JACKSONVILLE, FL 32225

Title: TRUS () Delete
Name: PATTON, DENNIS ACHR
Address: 888 BRIDRIER ST
City-St-Zip: JACKSONVILLE, FL 32223

Title: SEC () Delete
Name: CAMP, ANGELA H
Address: 12578 COUNTRY CHARM LN N
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TRUS (X) Change () Addition
Name: CAMP, STEVEN N CDB
Address: 6980 LAFAYETTE PARK DR
City-St-Zip: JACKSONVILLE, FL 32244

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

Title: SEC (X) Change () Addition
Name: CAMP, ANGELA H
Address: 6980 LAFAYETTE PARK DR
City-St-Zip: JACKSONVILLE, FL 32244

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: STEVEN N CAMP

CDB

04/18/2007

Electronic Signature of Signing Officer or Director

Date