2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004035

Entity Name: GOOD NEWS CHURCH OF GOD, INC.

Jul 27, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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11976-78 N. FLORIDA AVE 905 SKAGWAY AVENUE TAMPA, FL 33612 TAMPA, FL 33604

Current Mailing Address: New Mailing Address:

11976-78 N. FLORIDA AVE 905 SKAGWAY AVENUE TAMPA, FL 33612 TAMPA, FL 33604

FEI Number: 34-2063061 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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: Name and Address of New Registered Agent:

PIERRE, MICHEL PIERRE, MICHEL 5345 TREIG LANE 5345 TREIG LANE

WESLEY CHAPEL, FL 33544 US WESLEY CHAPEL, FL 33545 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: 07/27/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

VICTOR, ROLAND CHANEA, PATRICK Name: Name: Address: 16057 TAMPA PALMS BLVD., SUITE 404 Address: 16057 TAMPA PALMS BLVD. SUITE 404

City-St-Zip: TAMPA, FL 33544 City-St-Zip: TAMPA, FL 33544

(X) Change () Addition Title: () Delete Title: Name: CHANEA, PATRICK Name: CHANEA, NIXON

Address: 16057 TAMPA PALMS BLVD., SUITE 404 Address: 7416 PARKERSBURG BLVD.

City-St-Zip: TAMPA, FL 33544

TAMPA, FL 33544 City-St-Zip:

Title: () Delete Title: (X) Change () Addition YOLANDA, CHÂNEA Name: CHANEA, YOLANDA Name:

27825 BREAKERS DR 27825 BREAKERS DRIVE Address: Address: City-St-Zip: WESLEY CHAPEL, FL 33543 City-St-Zip: WESLEY CHAPEL, FL 33544

Title: () Delete Title: () Change (X) Addition

Name: Name: PIERRE, KETTLY

5450 BRUCE B. DOWNS BLVD. # 101 Address: Address: City-St-Zip: City-St-Zip: WESLEY CHAPEL, FL 33544

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: KETTLY PIERRE Т 07/27/2009