

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000007875

**FILED**  
**Feb 22, 2009**  
**Secretary of State**

**Entity Name:** CHURCH OF GOD OF PROPHECY OF THE LAST DAYS, INC.

**Current Principal Place of Business:**

432 N. KIRKMAN RD  
ORLANDO, FL 32811

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 585043  
ORLANDO, FL 328585043

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

LAGUERRE, ALTES  
432 N. KIRKMAN RD  
ORLANDO, FL 32811    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:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PT                      ( ) Delete  
Name: LAGUERRE, ALTES  
Address: 4743 CEDAR VIEW RD  
City-St-Zip: ORLANDO, FL 32811

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

Title: VT                      ( ) Delete  
Name: REVANGILE, MAURICE  
Address: 1945 GREYSTONE TRAIL  
City-St-Zip: ORLANDO, FL 32818

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

Title: ST                      ( ) Delete  
Name: JEROME, DOROTHY  
Address: 2377 LOCKE AVE  
City-St-Zip: ORLANDO, FL 32818

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

Title: TT                      ( ) Delete  
Name: POLEXY, JOSEPH  
Address: 1037 CLOVEREST RD  
City-St-Zip: ORLANDO, FL 32811

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

Title: T                      ( ) Delete  
Name: ONORE, ROBESTE  
Address: 432 N. KIRKMAN RD  
City-St-Zip: ORLANDO, FL 32811

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

Title: T                      ( ) Delete  
Name: ARITUS, FANES  
Address: 432 N. KIRKMAN RD  
City-St-Zip: ORLANDO, FL 32811

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

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: DOROTHY JEROME

ST

02/22/2009

Electronic Signature of Signing Officer or Director

Date