2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT

DOCUMENT # N06000011080

1. Entity Name SAND HILLS ASSEMBLY OF GOD INC



FILED Mar 12, 2008 8:00 am Secretary of State

03-12-2008 90037 004 ****70.00

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Principal Place of Business 14032 NORTH HIGHWAY 77 SOUTHPORT, FL 32409		Mailing Address 14032 NORTH HIGHWAY 77 SOUTHPORT, FL 32409		# ሰ ሰ#ን	1000				
2 Principal 6	Place of Business - No PO Boy #	3. Mailing Address							
2. Principal Place of Business - No P.O. Box #		3. Maining Address			I INTITION OF UNI	N NEWS WHILE WEIN AN	IAN ATAKTAN UMAHAN JI	RIL ESITA INVII SI	TITUDE OF FEMALE
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03072008 (Chg-NP	CR2E0	37 (12/06)		
City & State		City & State			4. FEI Number 50-28734	26			pplied For
Zip Country		Zip Country		-	5. Certificate of		M	\$8.75 Ad	ot Applicable ditional
								Fee Require	
6. Name and Address of Current Register		Registered Agent	Na Na	ame	7. Name and Ad	dress of New I	Registered /	Agent	
MILLER, GERALD N JR					(D.O. D.: Al				
	RKET STREET DRT. FL 32409		50	reet Address ((P.O. Box Number is	NOT ACCEPTAIN	IG) 		
	5111,12 02100								
			Cit	ty			FL	Zip Cod	le
8. The above	named entity submits this statement for	r the purpose of changing its	registered of	fice or register	red agent, or both, i	n the State of F		familiar with	and accept
	tions of registered agent.							,	and doodpi
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE	E: Registered Agen	t signsture required	d when reinstating)		DATE		
SIGNATURE	Signature, typed or printed name of registered agent a	<u> </u>			d when reinstating)	1			
SIGNATURE		end title if applicable. (NOTE 9. Election Carr Trust Fund C	npaign Financ		\$5.00 May Be Added to Fees		lake checi	k payable t	
10.	Filling Fee is \$61.25 Due by May 1, 2008 OFFICERS AND DIF	9. Election Cam Trust Fund C	npaign Financ Contribution.	cing	\$5.00 May Be	Flo	lake checi rida Depar	tment of S	tate
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attackment with an address, with all other like empowered.

SIGNATURE:

Rev Mila Miller

3/9/08

Daytime Phone #