

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011303

FILED  
Jan 14, 2008  
Secretary of State

Entity Name: BEAR CREEK ASSEMBLY OF GOD, INC.

**Current Principal Place of Business:**

11412 N. BEAR CREEK ROAD  
PANAMA CITY, FL 32404

**New Principal Place of Business:**

**Current Mailing Address:**

11412 N. BEAR CREEK ROAD  
PANAMA CITY, FL 32404

**New Mailing Address:**

FEI Number: 59-2240501      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DISSMORE, PERRY R  
10905 S. FORK LOOP  
PANAMA CITY, FL 32404      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:**

Title: BM      ( ) Delete  
Name: MILES, JOEY  
Address: 10314 MILES LANE  
City-St-Zip: PANAMA CITY, FL 32404

Title: BM      ( ) Delete  
Name: HOOD, GLENN  
Address: 11425 2ND STREET  
City-St-Zip: YOUNGSTOWN, FL 32466

Title: BM      ( ) Delete  
Name: COBB, MICHAEL  
Address: 5935 PIPPIN ROAD  
City-St-Zip: PANAMA CITY, FL 32404

Title: BM      ( ) Delete  
Name: DEAL, STEPHEN  
Address: 10326 MILES LANE  
City-St-Zip: PANAMA CITY, FL 32404

Title: TRES      ( ) Delete  
Name: MILES, MARY L  
Address: 10314 MILES LANE  
City-St-Zip: PANAMA CITY, FL 32404

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

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

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

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

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

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: PERRY DISSMORE

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

REV

01/14/2008

\_\_\_\_\_  
Date