

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012880

FILED  
Jul 13, 2009  
Secretary of State

**Entity Name:** GOD'S III'S INTERNATIONAL CHURCH, INC.

**Current Principal Place of Business:**

3943 ROSEWOOD WAY  
ORLANDO, FL 32808

**New Principal Place of Business:**

**Current Mailing Address:**

3943 ROSEWOOD WAY  
ORLANDO, FL 32808

**New Mailing Address:**

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

BENNETT, CIERA  
6721 SAWMILL DRIVE  
OCOE, FL 34761 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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ROBINSON, BEVERLY  
Address: 6821 LUMBERJACK LANE  
City-St-Zip: OCOEE, FL 34761

Title: AD ( ) Delete  
Name: BENNETT, CANDACE  
Address: 2535 SHEILA DR  
City-St-Zip: APOPKA, FL 32712

Title: TD ( ) Delete  
Name: BERGMAN, JACKIE  
Address: 1001 WATTS AVE  
City-St-Zip: DELAND, FL 32724

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

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

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

Title: TD (X) Change ( ) Addition  
Name: ROBERTS, RAQUAN  
Address: 108 BEARLAKE RD  
City-St-Zip: APOPKA, FL 32703

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: CIERA BENNETT

PD

07/13/2009

Electronic Signature of Signing Officer or Director

Date