


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 11, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N06515</b> 1. Entity Name <b>THE SANTIFIED AND HOLINESS CHURCH OF GOD WITHOUT SPOT OR WRINKLE</b>	
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Principal Place of Business <b>1217 N.E. 7TH PL. GAINESVILLE, FL 32601</b>	Mailing Address <b>728 STATENVILLE RD VALDOSTA, GA 31601</b>
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01062008 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>59-2464037</b>	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  <b>BANNISTER, SAM 1217 NE 7TH PLACE GAINESVILLE, FL 32601</b>	<p style="text-align: center; font-size: 24pt; font-weight: bold;">DO NOT WRITE IN THIS SPACE</p>
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____	DATE _____
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**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BANNISTER, SAM 1217 NE 7TH PLACE GAINESVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALBERT, PLEMON 811 NE 26TH TERRACE GAINESVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAYS, PERCEY 1025 NW 5TH AVENUE GAINESVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MACK, EARLENE 728 STATENVILLE RD VALDOSTA, GA 31601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BANNISTER, SHEILA 804 NE 25TH TERR GAINESVILLE, FL 32601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/11/08-80055-010 70.00

DO NOT WRITE  
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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 attachment with an address, with all other like empowered.

<b>SIGNATURE: Earlene Mack</b> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	<b>1-7-08</b> Date	<b>229-242-1810</b> Daytime Phone #
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