

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006230

FILED
Apr 23, 2009
Secretary of State

Entity Name: CHURCH OF GOD OF PROPHECY OF PUNTA GORDA, INC.

Current Principal Place of Business:

662 COOPER STREET
PUNTA GORDA, FL 33950

New Principal Place of Business:

Current Mailing Address:

662 COOPER STREET
PUNTA GORDA, FL 33950

New Mailing Address:

FEI Number: 59-2350625

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAFTS, EVA M
2916 NE 9TH STREET
CAPE CORAL, FL 33993 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: PD () Delete
Name: DAVIS, GEORGE
Address: 3700 ACLINE ROAD
City-St-Zip: PUNTA GORDA, FL 339511552

Title: VPD () Delete
Name: RIGGS, DON
Address: 6980 ALBRITTON AVENUE
City-St-Zip: ARCADIA, FL 34266

Title: SD () Delete
Name: STURDIVANT, JOHNNY
Address: 27455 JONES LOOP ROAD
City-St-Zip: PUNTA GORDA, FL 33982

Title: TD () Delete
Name: WHIDDEN, DAVID
Address: 23124 HILLSDALE AVENUE
City-St-Zip: PORT CHARLOTTE, FL 339542454

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:

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: GEORGE DAVIS

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date