

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Jun 30, 2008 8:00 am
Secretary of State

05-16-2008 90016 039 ****70.00

DOCUMENT # N07000007870 1. Entity Name CHURCH OF GOD OF PALM BAY INC.			
Principal Place of Business 128 VIA DE CASAS NORTE BOYNTON, FL 33426		Mailing Address 128 VIA DE CASAS NORTE BOYNTON, FL 33426	
2. Principal Place of Business - No P.O. Box 3085 Jupiter Blvd. SE Suite, Apt. #, etc. Suite #7 City & State Palm Bay, FL Zip 32909 Country USA		3. Mailing Address 3085 Jupiter Blvd. SE Suite, Apt. #, etc. Suite #7 City & State Palm Bay, FL Zip 32909 Country USA	
4. FEI Number 30-0467116		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required		04302008 Chg-NP CR2E037 (12/06)	
6. Name and Address of Current Registered Agent DOR, MIRVILLE 128 VIA DE CASAS NORTE BOYNTON, FL 33426		7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ State FL Zip Code _____	
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: <u>Mirville Dor</u> DATE: <u>5-13-08</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)			
Filing Fee is \$81.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State		10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD DOR, MIRVILLE 128 VIA DE CASAS NORTE BOYNTON, FL 33426	☐ Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T MEDASTIN, MARIE A 128 VIA DE CASAS NORTE BOYNTON, FL 33426	☐ Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD MARCELIN, MAXI 1802 JUPITER BLVD SW PALM BAY, FL 32908	☐ Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD PIERRE, HOMER 1521 ERIE CT PALM BAY, FL 32909	☐ Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	_____ _____ _____ _____	☐ Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	_____ _____ _____ _____	☐ Delete	
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition	
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.			
SIGNATURE: <u>Mirville Dor</u>		DATE: <u>5-13-08</u>	

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