2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008499

Entity Name: EBENEZER ASSEMBLY OF GOD, INC.

FILED Mar 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1600 S.W. 5TH PLACE FORT LAUDERDALE, FL 33312 **Current Mailing Address: New Mailing Address:** P.O. BOX 15885 FORT LAUDERDALE, FL 33318 FEI Number: 26-0837520 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALEXIS, HERNS REV 7180 NW 20TH CT SUNRISE, FL 33313 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete YEARY, MAX Name: Name: 2699 WEST COMMERCIAL BLVD. Address: Address: City-St-Zip: FT LAUDERDALE, FL 33309 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: ALEXIS, HERNS Name: ALEXIS, HERNS PASTOR Address: 7180 N.W. 20TH CT. Address: 7180 N.W. 20TH CT. City-St-Zip: SUNRISE, FL 33312 City-St-Zip: SUNRISE, FL 33313 Title: () Delete Title: () Change () Addition RABURN, TERRELL R Name: Name: 1437 E. MEMORIAL BLVD. Address: Address: City-St-Zip: LAKELAND, FL 33801 City-St-Zip: Title: () Delete Title: () Change () Addition Name: BETZER, DAN C Name: 6901 HARBOR LANE Address: Address: City-St-Zip: FT. MYERS, FL 33919 City-St-Zip: Title: () Delete Title: () Change () Addition POWELL, STEVEN L Name: Name: 7303 GUNSTOCK DR. Address: Address: City-St-Zip: LAKELAND, FL 33809 City-St-Zip: Title: () Delete Title: () Change () Addition BLACKBURN, M. WAYNE Name: Name: Address: 1401 GIRFFIN RD. Address: LAKELAND, FL 33804 City-St-Zip: 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: REV. HERNS ALEXIS, PASTOR PAST 03/16/2009