

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 01, 2008
Secretary of State**

DOCUMENT# N07000009340

Entity Name: FIRST CHURCH OF GOD, INC. LIVE OAK

Current Principal Place of Business:

721 WEST 3 AVENUE
LIVE OAK, FL 32060

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 782
LIVE OAK, FL 32060

New Mailing Address:

FEI Number: 59-2940725 FEI Number Applied For () 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:

SPANN, LEONA J PASTOR
8181 MERIVALE RD.
JACKSONVILLE, FL 32208 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: D () Delete
Name: WILLIAMS, DONALD B CLERK
Address: 535 TAYLOR ST.
City-St-Zip: LIVE OAK, FL 32060

Title: S () Delete
Name: WILLIAMS, WANDA
Address: 535 TAYLOR ST.
City-St-Zip: LIVE OAK, FL 32060

Title: CHRM () Delete
Name: PHILPOT, LEORY TRUSTEE
Address: 194 JOHNSON BLVD.
City-St-Zip: LIVE OAK, FL 32060

Title: T () Delete
Name: BROADNAX, DARCY
Address: 1175 74TH TRACE
City-St-Zip: LIVE OAK, FL 32060

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: DONALD B. WILLIAMS

D

05/01/2008

Electronic Signature of Signing Officer or Director

_____ Date