2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009411

Entity Name: ALL NATIONS GOSPEL CHURCH, INC.

FILED Mar 18, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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6225 PENDRAGON PLACE JACKSONVILLE, FL 32258

Current Mailing Address: New Mailing Address:

6225 PENDRAGON PLACE 6225 PENDRAGON PL

JACKSONVILLE, FL 32258 JACKSONVILLE, FL 32258 US

FEI Number: 26-1159229 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:

HOWARD J. SMITH, PA

12961 NORTH MAIN STREET

SUITE 203

ABRAHAM, CHARLES

6225 PENDRAGON PL

JACKSONVILLE, FL 32258 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: CHARLES ABRAHAM 03/18/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

JACKSONVILLE, FL 32218 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition

 Name:
 ABRAHAM, CHARLES
 Name:

 Address:
 6225 PENDRAGON PLACE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32258
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 ABRAHAM, ESTHER
 Name:

 Address:
 6225 PENDRAGON PLACE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32258
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

Name: FERREN, REBECCA Name: COTTO, ALEXANDRA

Address: 4915 BAY MEADOWS ROAD Address: 7632 SOUTHSIDE BLVD APT#171 City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: JACKSONVILLE, FL 32256

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: CHARLES ABRAHAM D 03/18/2009