2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011399

FILED Jan 20, 2009 Secretary of State

Entity Name: CHURCH OF GOD OF PROPHECY OF TALLAHASSEE, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1221 DADE STREET FALLAHASSEE, FL				1221 DADE STREET TALLAHASSEE, FL 32304 US	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
PO BOX 4044 FALLAHASSEE, FL 323154044			PO BOX 4044 TALLAHASSEE, FL	PO BOX 4044 TALLAHASSEE, FL 323154044 US	
El Number:	: 26-3284030	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:	
387 VICTC TALLAHAS The above		DR 301 US	irpose of changing its register	ed office or registered agent, or both,	
	e of Florida. 				
SIGNATUF		nic Signature of Registered Ager	nt	 Date	
OFFICERS	S AND DIREC			SES TO OFFICERS AND DIRECTORS	
Fitle:) Delete	Title:	() Change () Addition	
Name: Name: Nddress: City-St-Zip:	BECKWITH, TI PO BOX 3230 TALLAHASSEE	HEODORE R	Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	STD (CAINE, MINNIE 2366 TAMARIN TALLAHASSEE	ID COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	D (CAREY, RODN 2118-A PECAN TALLAHASSEE	N LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Nddress: City-St-Zip:	D (COOPER, WA 1341 WESTHE TALLAHASSEE	EAVEN COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	D (JACKSON, AR 1554 LAKE AV TALLAHASSEE	E #304	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	D (HALL, T. WAY 8601 KINGSTO TALLAHASSEE	ON COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: THEODORA L. CAREY O 01/20/2009