


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90066 022 ****74.00

DOCUMENT # N07829 1. Entity Name POOLE MEMORIAL INDEPENDENT CHURCH OF GOD IN CHRIST WITH CHRIST IN JESUS, INC.			
Principal Place of Business 869 POPLAR LANE LAKE CITY, FL 32025		Mailing Address 869 POPLAR LANE LAKE CITY, FL 32025	
2. Principal Place of Business - No P.O. Box # 894 N. Marion Avenue Suite, Apt. #, etc.		3. Mailing Address 894 N. Marion Ave Suite, Apt. #, etc.	
City & State Lake City, Florida Zip 32055		City & State Lake City, Florida Zip 32055	
Country USA		Country USA	
4. FEI Number 59-2056024		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FRANKLIN, LANG C 869 SW POPLAR LANE LAKE CITY, FL 32025		7. Name and Address of New Registered Agent Name Samuel Lee Latham Street Address (P.O. Box Number is Not Acceptable) 467 NW Jefferson Street City Lake City, FL Zip Code 32055	
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 obligation of the registered agent.			
SIGNATURE Samuel Lee Latham <small>Signature, typed or printed name of registered agent and title if applicable.</small>		DATE 3/17/07 <small>(NOTE: Registered Agent signature required when reinstating)</small>	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input checked="" type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HORTON, GEORGE 943 NW BROWN RD LAKE CITY, FL 32055 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDS Samuel Latham 467 NW Jefferson St. Lake City, FL 32055 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HORTON, MARGARET 943 NW BROWN RD LAKE CITY, FL 32055 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Donne Thomas 688 NW Wilson St. Lake City, FL 32055 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCCOY, ESTHER 983 NW BROWN RD LAKE CITY, FL 32055 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Charles Latham 871 NE Congress Avenue Lake City, FL 32055 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HORTON, RANDY 1721 E DUVAL ST LAKE CITY, FL 32055 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Tabitha Owens 1004 NE Goodvine Way Lake City, FL 32055 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HORTON, JOE 2040 DELEENE RD YULEE, FL 32097 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Henry Wayne Britt 13801 Jackson St. Miami, FL 33176 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDS FRANKLIN, LANG C 869 SW POPLAR LANE LAKE CITY, FL 32025 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Lang C Franklin 869 SW Poplar Lane Lake City, FL 32025 <input checked="" type="checkbox"/> Change <input type="checkbox"/> 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 to an address, with all other like entries.			
SIGNATURE Samuel Lee Latham <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		DATE 3/17/07 <small>Date Time Phone #</small>	

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