

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000102

FILED
Mar 21, 2009
Secretary of State

Entity Name: CHURCH OF GOD OF PROPHECY OF MARIANNA, INC

Current Principal Place of Business:

2840 MCPHERSON ST
MARIANNA, FL 32448

New Principal Place of Business:

Current Mailing Address:

1973 DOVE REST DR
MARIANNA, FL 32448

New Mailing Address:

FEI Number: 59-3349799

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADKINSON, ALCUS R SR
1793 DOVE REST DR
MARIANNA, FL 32448 US

Name and Address of New Registered Agent:

ADKINSON, ALCUS R SR
1793 DOVE REST DR
MARIANNA, FL 32448 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: ALCUS R ADKISON SR

03/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: ADKINSON, ALCUS R
Address: 1973 DOVE REST DR
City-St-Zip: MARIANNA, FL 32448

Title: DT () Delete
Name: ADKINSON, BETTY J
Address: 1973 DOVE REST DR
City-St-Zip: MARIANNA, FL 32448

Title: TT () Delete
Name: NESTER N, WILLIAM C JR
Address: 1265 MAPOLES ST
City-St-Zip: CRESTVIEW, FL 32536

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ADKINSON, ALCUS R
Address: 1973 DOVE REST DR
City-St-Zip: MARIANNA, FL 32448

Title: S (X) Change () Addition
Name: ADKINSON, BETTY J
Address: 1973 DOVE REST DR
City-St-Zip: MARIANNA, FL 32448

Title: T (X) Change () Addition
Name: NESTER, WILLIAM C JR
Address: 1265 MAPOLES ST
City-St-Zip: CRESTVIEW, FL 32536

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: ALCUS R ADKISON SR

P

03/21/2009

Electronic Signature of Signing Officer or Director

Date