

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000000535

**FILED**  
**Apr 21, 2011**  
**Secretary of State**

**Entity Name:** CHURCH OF GOD OF PROPHECY OF BROOKER, FL, INC

**Current Principal Place of Business:**

17090 OLIVE AVE  
BROOKER, FL 32622

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 14  
BROOKER, FL 32622

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROGERS, ROSA G  
17090 OLIVE AVE  
BROOKER, FL 32622 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: PT  
Name: JOHNSON, ROBERT W  
Address: PO BOX 131  
City-St-Zip: BROOKER, FL 32622

Title: T  
Name: TETSTONE, CATHERINE  
Address: 11952 N BLOPHAM  
City-St-Zip: BROOKER, FL 32622

Title: ST  
Name: PARKER, JAMES  
Address: 904 WOODLAWN ST  
City-St-Zip: STARKE, FL 32091

I hereby 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 all other like empowered.

**SIGNATURE:** ROSA ROGERS

RA

04/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date