

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005204

FILED
Apr 07, 2009
Secretary of State

Entity Name: GLORY TEMPLE FIRST BORN CHURCH OF THE LIVING GOD OF PLANT CITY, INC

Current Principal Place of Business:

1301 E CHURCH STREET
PLANT CITY, FL 33563

New Principal Place of Business:

Current Mailing Address:

1301 E CHURCH STREET
PLANT CITY, FL 33563

New Mailing Address:

FEI Number: 42-1693291

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNIGHTEN, TIMOTHY
2110 SYDNEY DOVER RD
DOVER, FL 33527 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: P () Delete
Name: LEWIS, JAMES E SR
Address: 708 BOND ST
City-St-Zip: PLANT CITY, FL 33563

Title: V () Delete
Name: JONES, ANDREW
Address: 807 S JACKSON ST
City-St-Zip: PLANT CITY, FL 33563

Title: S () Delete
Name: RICHARDSON, BEATRICE
Address: 1302 W WASHINGTON ST
City-St-Zip: PLANT CITY, FL 33563

Title: T () Delete
Name: LEWIS, JAMES E JR
Address: 529 NORTHRIDE TRAIL
City-St-Zip: LAKE LAND, FL 33813

Title: D () Delete
Name: JONES, MAMIE
Address: 807 S JACKSON ST
City-St-Zip: PLANT CITY, FL 33563

Title: D () Delete
Name: LEWIS, COURTNEY
Address: 529 NORTHRIDE TRAIL
City-St-Zip: LAKE LAND, FL 33813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JAMES E. LEWIS SR.

P

04/07/2009

Electronic Signature of Signing Officer or Director

Date