

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000003709

**FILED**  
**Apr 29, 2012**  
**Secretary of State**

**Entity Name:** OLEANDER AVE., CHURCH OF GOD, INC.

**Current Principal Place of Business:**

3212 OLEANDER AVENUE  
FORT PIERCE, FL 34982

**New Principal Place of Business:**

**Current Mailing Address:**

3212 OLEANDER AVENUE  
FORT PIERCE, FL 34982

**New Mailing Address:**

**FEI Number:** 27-2374494

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PHILLIPS, DOUG  
5935 TELFORD AVENUE  
PORT ST. LUCIE, FL 34983 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:** PD  
**Name:** PHILLIPS, DOUG  
**Address:** 5935 TELFORD AVENUE  
**City-St-Zip:** PORT ST. LUCIE, FL 34983

**Title:** TD  
**Name:** BECKFORD, REGINALD  
**Address:** 2364 S.E. GILLETTE AVENUE  
**City-St-Zip:** PORT ST. LUCIE, FL 34952

**Title:** SD  
**Name:** MCDANIEL, RANDY  
**Address:** 906 OSCEOLA DR.  
**City-St-Zip:** FORT PIERCE, FL 34982

**Title:** D  
**Name:** JENKINS, BRIAN  
**Address:** 541 S. BROCKSMITH ROAD  
**City-St-Zip:** FORT PIERCE, FL 34945

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:** DOUG PHILLIPS

PAST

04/29/2012

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

\_\_\_\_\_  
Date