

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11565

FILED
Apr 21, 2005
Secretary of State

Entity Name: VALPARAISO FIRST ASSEMBLY OF GOD, INC.

Current Principal Place of Business:

571 VALPARAISO PKWY
VALPARAISO, FL 32580 US

New Principal Place of Business:

Current Mailing Address:

571 VALPARAISO PKWY
VALPARAISO, FL 32580 US

New Mailing Address:

FEI Number: 59-6603891 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLENDENING, GUEARY H
363 EVERGREEN AVE.
NICEVILLE, FL 32578 US

Name and Address of New Registered Agent:

CLENDENING, GUEARY H
364 EVERGREEN AVE.
NICEVILLE, FL 32578 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: GUEARY H. CLENDENING

04/21/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CLENDENING, GUEARY H,
Address: 364 EVERGREEN AVENUE
City-St-Zip: NICEVILLE, FL 32578

Title: SD () Delete
Name: CARRAND, JOHN
Address: 1130 MUIRFIELD WAY
City-St-Zip: NICEVILLE, FL 32578

Title: VD () Delete
Name: BARFIELD, JOE
Address: 2419 EDGEWATER DRIVE
City-St-Zip: NICEVILLE, FL 32578

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: CARRAND, JOHN
Address: 1130 MUIRFIELD WAY
City-St-Zip: NICEVILLE, FL 32578

Title: SD (X) Change () Addition
Name: SJOSTROM, LARRY
Address: 4004 13TH STREET
City-St-Zip: NICEVILLE, FL 32578

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GUEARY H. CLENDENING

PD

04/21/2005

Electronic Signature of Signing Officer or Director

Date