2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2004
Secretary of State

DOCUMENT# N16146

Entity Name: FIRST ASSEMBLY OF GOD OF SPRINGHILL, FLORIDA, INCORPORATED

Current Principal Place of Business:

12435 SPRING HILL DRIVE
SPRING HILL, FL 34609

New Principal Place of Business:

Current Mailing Address:

12435 SPRINGHILL DRIVE
SPRINGHILL, FL 34609

New Mailing Address:

FEI Number: 59-2062308 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COATS, TIMOTHY R
12435 SPRING HILL DR
SPRING HILL, FL 34609 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:	COATS, TIMOTHY R	
Address:	4166 E. LEMA DR	
City-St-Zip:	SPRINGHILL, FL 34609	
Title:	D	( ) Delete
Name:	CAMPEA, PAUL P	
Address:	2333 GIMLET AVENUE	
City-St-Zip:	SPRING HILL, FL 34608	
Title:	D	( ) Delete
Name:	CENTENO, NAOMI J	
Address:	17838 FANCY LANE	
City-St-Zip:	HUDSON, FL 34667	
Title:	D	( ) Delete
Name:	HEROD, TIM	
Address:	13112 GROVELAND STREET	
City-St-Zip:	SPRING HILL, FL 34609	

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:	

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: TIMOTHY R. COATS P 01/07/2004

Electronic Signature of Signing Officer or Director — Date