


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004 08:00 AM
Secretary of State

DOCUMENT # N16874
 1. Entity Name
CARMEL ASSEMBLY OF GOD CHURCH OF BONIFAY, FL, INC.



Principal Place of Business 1485 CARMEL CHURCH ROAD BONIFAY, FL 32425	Mailing Address 1485 CARMEL CHURCH ROAD BONIFAY, FL 32425
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DO NOT WRITE IN THIS SPACE



04072004 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-1946587	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
HAWKINS, LARRY
 1311 HWY 177
 BONIFAY, FL 32425

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

000000133019
 04/27/04-80071-023 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC HAWKINS, LARRY 1311 HWY 177 BONIFAY, FL 32425
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOCKE, W.J. 1460 LOCKE ROAD BONIFAY, FL 32425
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CORBIN, OTIS, JR. 2919 MARVIN MOSS RD BONIFAY, FL 32425
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PAUL, OLLEN ODELL 1401 METCALF RD BONIFAY, FL 32425
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLIFFORD, HODGE 2353 HODGE LANE BONIFAY, FL 32425
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Larry Hawkins (Larry Hawkins) 4-25-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #