

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20349

FILED  
Apr 11, 2005  
Secretary of State

**Entity Name:** THE FULL GOSPEL ASSEMBLY OF SHADY HILLS, FLORIDA, INC.

**Current Principal Place of Business:**

C/O ROY C. HOGAN  
17945 SHADY HILL RD.  
SPRING HILL, FL 34610 US

**New Principal Place of Business:**

**Current Mailing Address:**

% ROY C. HOGAN  
17945 SHADY HILL RD  
SPRING HILL, FL 34610

**New Mailing Address:**

**FEI Number:** 59-2924282

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOGAN, ROY C.  
17945 SHADY HILLS ROAD  
SPRING HILL, FL 34610 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: TD ( ) Delete  
Name: GREER, JOSEPH  
Address: 16236 HELEN K DR  
City-St-Zip: SPRING HILL, FL 34610

Title: MPD ( ) Delete  
Name: HOGAN, ROY C.  
Address: 17945 SHADY HILLS ROAD  
City-St-Zip: SPRINGHILL, FL

Title: S ( ) Delete  
Name: COLVIN, CAROL  
Address: 17551 NICKS CR  
City-St-Zip: BROOKSVILLE, FL 34610

Title: VPD ( ) Delete  
Name: MCCRAY, DANNY  
Address: 16311 NICKS DRIVE  
City-St-Zip: SPRINGHILL, FL 34610

Title: D ( ) Delete  
Name: TAYLOR, STAN  
Address: 18266 NELSON RD  
City-St-Zip: SPRING HILL, FL 34610

Title: D ( ) Delete  
Name: HORNSBY, JACK L  
Address: 17201 HARMONY DR  
City-St-Zip: HUDSON, FL 34667

**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 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: JOSEPH GREER

TD

04/11/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date