2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20899

FILED Apr 25, 2005 Secretary of State

Entity Name: HOSANNA ASSEMBLY OF GOD, INC.

Current Principal Place of Business: New Principal Place of Business:

18924 COUNTY LINE RD SPRING HILL, FL 34610

Current Mailing Address: New Mailing Address:

18924 COUNTY LINE RD SPRING HILL, FL 34610

FEI Number: 59-2803414 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WASHBURN, PAUL DR.

1324 SEVEN SPRINGS BLVD., #156
TRINITY, FL 34655 US

WOODWELL, ROGER A REV.
18924 COUNTY LINE ROAD
SPRINGHILL, FL 34610 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: ROGER A WOODWELL 04/25/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TRES () Delete Title: () Change () Addition

 Name:
 WEST, JAMES M MR.
 Name:

 Address:
 1091 ROOSEVELT AVE
 Address:

 City-St-Zip:
 MASARYKTOWN, FL 34609 US
 City-St-Zip:

Title: DEAC () Delete Title: () Change () Addition

 Name:
 BOWSHER, GEORGE M MR.
 Name:

 Address:
 14121 PEACE BLVD
 Address:

 City-St-Zip:
 SPRING HILL, FL 34610 US
 City-St-Zip:

Title:PRES () DeleteTitle:PRES (X) Change () AdditionName:WASHBURN, PAUL DR.Name:WOODWELL, ROGER A REVAddress:1324 SEVEN SPRINGS BLVD., #156Address:18924 COUNTY LIND ROAD

Address: 1324 SEVEN SPRINGS BLVD., #156 Address: 18924 COUNTY LIND ROA City-St-Zip: TRINITY, FL 34655 City-St-Zip: SPRINGHILL, FL 34610

Title: TTEE () Delete Title: DEAC (X) Change () Addition

 Name:
 GRIFFITH, GARY
 Name:
 JOHN, POOLE MR

 Address:
 24298 MCCAW RD
 Address:
 3217 ABELINE ROAD

 City-St-Zip:
 BROOKSVILLE, FL 34605 US
 City-St-Zip:
 SPRINGHILL, FL 34608 US

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: JAMES M WEST TRES 04/25/2005