2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Mar 08, 2006 8:00 am **Secretary of State** DOCUMENT # N28989 1. Entity Name 03-08-2006 90174 046 ****61.25 FIRST ASSEMBLY OF GOD OF CRYSTAL RIVER, INC. Principal Place of Business Mailing Address 5735 W. GULF-TO-LAKE HWY PO BOX 367 **CRYSTAL RIVER FL 34429** CRYSTAL RIVER FL 34423 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) Applied For City & State City & State 4. FEI Number 59-2235792 Not Applicable Country Zip Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HART, RICHARD REV Street Address (P.O. Box Number is Not Acceptable) 5735 W. GULF-TO-LAKE HWY CRYSTAL RIVER'FL 34429 Zip Code 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 it applicable (NOTE: Registered Agent signature required whon reinstating) **FILE NOW: FEE IS \$61.25** 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2006 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE Change X Addition TITLE ■ Delete D WATT, TED NAME MAME Bernhardt, Andrew E. 6608 W. WOODLYNN LANE STREET ADDRESS STREET ADDRESS 11481 W. Bayshore Drive HOMOSASSA FL 34448 CITY-ST-ZIP CITY-ST-7IP Crystal River. FL 34429 ☐ Change ☐ Addition ☐ Delete TITLE THILE MCGEE, RAY STEPHEN NAME NAME LAUREL STREET PO BOX 223 STREET ADDRESS STREET ADDRESS LECANTO FL 34460 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE BOWEN, TREVOR NAME NAME STREET ADDRESS 265 W. ROMONY LOOP STREET ADDRESS BEVERLY HILLS FL 34465 CITY-ST-7IP CITY-ST-719 ☐ Change ☐ Addition Detete TITLE TITLE THOMAS, F N NAME STREET ADDRESS LAUREL ST PO BOX 311 STREET ADDRESS LECANTO FL 34460 CITY-ST-ZIP CITY-ST-ZIP DPC ☐ Delete TITLE ☐ Change ☐ Addition TITLE HART RICHARD NAME 713 N. VENTURI AVE. STREET ADDRESS STREET ADDRESS CRYSTAL RIVER FL 34429 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

FILED

SIGNATURE Richard R. Hart Jr. 02-15-06 352-795-2594

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.