

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 02, 2004
Secretary of State**

DOCUMENT# N31590

Entity Name: ASSEMBLY OF TOGETHERNESS IN CHRIST, INC.

Current Principal Place of Business:

New Principal Place of Business:

%SAMUEL JOHNSON
2422 E. EMMA STREET
TAMPA, FL 33610

Current Mailing Address:

New Mailing Address:

%SAMUEL JOHNSON
2422 E. EMMA STREET
TAMPA, FL 33610

FEI Number: 59-2989987 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:

JOHNSON, SAMUEL
2422 E. EMMA STREET
TAMPA, FL 33610 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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JOHNSON, SAMUEL,
Address: 2422 E. EMMA STREET
City-St-Zip: TAMPA, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STD () Delete
Name: JOHNSON, CARMEN A.B.,
Address: 2422 E. EMMA STREET
City-St-Zip: TAMPA, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: JENNINGS, FRANCES C.,
Address: 1746 ST. JOSEPH STREET
City-St-Zip: TAMPA, FL

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: SAMUEL N. JOHNSON

PD

05/02/2004

Electronic Signature of Signing Officer or Director

_____ Date