

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31590

FILED
May 04, 2007
Secretary of State

Entity Name: ASSEMBLY OF TOGETHERNESS IN CHRIST, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 59-2989987 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JOHNSON, SAMUEL
2422 E. EMMA STREET
TAMPA, FL 33610 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: PD () Delete
Name: JOHNSON, SAMUEL,
Address: 2422 E. EMMA STREET
City-St-Zip: TAMPA, FL

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

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

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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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

05/04/2007

Electronic Signature of Signing Officer or Director

_____ Date