

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36741

FILED
Apr 17, 2006
Secretary of State

Entity Name: CHURCH OF THE LIVING GOD IN MIAMI, INC.

Current Principal Place of Business:

1099 NW 151 ST
MIAMI, FL 33055

New Principal Place of Business:

1099 NW 151 ST
MIAMI, FL 33169

Current Mailing Address:

4105 NW 195 ST
MIAMI, FL 33055

New Mailing Address:

FEI Number: 65-0225356

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HOLLOWAY, LEONARD N PD
1206 E 17 AVE
TAMPA, FL 33605 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: HOLLOWAY, LEONARD N
Address: 1206 E 17 AVE
City-St-Zip: TAMPA, FL 33605

Title: VD () Delete
Name: BOUDREAUX, FRANCIS D
Address: 1212 E 17 AVENUE
City-St-Zip: TAMPA, FL 33605

Title: SD () Delete
Name: SOLOMON, WILLIE L
Address: 17521 NW 47TH CT
City-St-Zip: MIAMI, FL 33055

Title: TD () Delete
Name: WELLS, CALTON E
Address: 4105 NW 195 STREET
City-St-Zip: MIAMI, FL 33055

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: CALTON E WELLS

TD

04/17/2006

Electronic Signature of Signing Officer or Director

Date