

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

FILED
Apr 28, 2006 8:00 am
Secretary of State

04-28-2006 90153 032 ****70.00

DOCUMENT # N41641

1. Entity Name -

1102 SOUTH TYLER STREET-CHURCH OF THE LIVING
GOD OF PLANT CITY, FLORIDA, INC.



Principal Place of Business

1102 SOUTH TYLER STREET
PLANT CITY FL 33566
US

Mailing Address

1102 SOUTH TYLER ST.
PLANT CITY FL 33566

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

604 Lincoln St

City & State

City & State

Plant City FL

Zip

Country

Zip

33563

Country

Hillsborough

4. FEI Number

59-3128189

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/05)



6. Name and Address of Current Registered Agent

SMITH, FRANK, JR.
1102 S. TYLER ST.
PLANT CITY FL 33566

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PT
NAME SMITH, FRANK, JR. ☐ Delete
STREET ADDRESS 1207 S. TYLER ST.
CITY-ST-ZIP PLANT CITY FL

TITLE TT
NAME LAMPKIN, EVELYN ☐ Delete
STREET ADDRESS 604 LINCOLN ST.
CITY-ST-ZIP PLANT CITY FL

TITLE ST
NAME PIEREIRA, JACQUELIN ☐ Delete
STREET ADDRESS 406 S. HOWARD ST.
CITY-ST-ZIP PLANT CITY FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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.

SIGNATURE: Frank Smith Jr. FRANK SMITH JR.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/06 (813) 752-7600

Date

Daytime Phone