2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42204

FILED Apr 21, 2005 Secretary of State

Entity Name: GETHSEMANE CHURCH OF CHRIST WRITTEN IN HEAVEN, INC.

A599 WINTERGREEN RD GREENWOOD, FL 32442 FEI Number: 59-3045191 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desir Name and Address of Current Registered Agent: Name and Address of New Registered Agent: POLLOCK, NATHANIEL 364 LINCOLN DRIVE CHATTAHOOCHEE, FL 32334 US The above named entity submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent	New Principal Place of Business:	rent Principal Place of Business:
A599 WINTERGREEN RD GREENWOOD, FL 32442 FEI Number: 59-3045191 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desir Name and Address of Current Registered Agent: Name and Address of New Registered Agent: POLLOCK, NATHANIEL 364 LINCOLN DRIVE CHATTAHOOCHEE, FL 32334 US The above named entity submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent		
FEI Number: 59-3045191 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desirn Name and Address of Current Registered Agent: Name and Address of New Registered Agent: POLLOCK, NATHANIEL 3844 LINCOLN DRIVE CHATTAHOOCHEE, FL 32334 US The above named entity submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DI Title:	New Mailing Address:	rent Mailing Address:
Name and Address of Current Registered Agent: POLLOCK, NATHANIEL 3844 LINCOLN DRIVE CHATTAHOOCHEE, FL 32334 US The above named entity submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent		
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2364 LINCOLN DRIVE CHATTAHOOCHEE, FL 32334 US The above named entity submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent	Name and Address of New Registered Agent:	ne and Address of Current Registered Agent:
in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DI Title: D () Delete Title: () Change () Addition Name: NIX, TERRY Name: Address: City-St-Zip: DOTHAN, AL City-St-Zip: Title: D () Delete Title: () Change () Addition Name: GROOMS, DARRYL Name: Address: 3568 FLAT RD Address: City-St-Zip: City-St		LINCÓLN DRIVE
Electronic Signature of Registered Agent OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DI Title: D () Delete Title: () Change () Addition Name: NIX, TERRY Address: 1102 AGUTHA DRIVE City-St-Zip: DOTHAN, AL Title: D () Delete Title: () Change () Addition Name: GROOMS, DARRYL Address: 3568 FLAT RD Address: 3568 FLAT RD City-St-Zip: GREENWOOD, FL Title: D () Delete Title: () Change () Addition Name: HORNE, LIZZIE Address: 3591 FLAT RD Address: () Change () Addition Name: Address: () Change () Addition Name: Address: Address: Address: Address: () Change () Addition Name: Address: Address: Address: () Change () Addition Name: Address: Address: Address: () Change () Addition Name: Address: Address: Address: () Change () Addition	e purpose of changing its registered office or registered agent, or both,	
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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: NATHANIEL POLLOCK PAST 04/21/2005