

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 14, 2006
Secretary of State

DOCUMENT# N42728

Entity Name: GOULDS TEMPLE CHURCH OF GOD IN CHRIST, INC.**Current Principal Place of Business:**12005 SW 213TH TERRACE
GOULDS, FL 33170**New Principal Place of Business:****Current Mailing Address:**9880 PALMETTO CLUB DRIVE
MIAMI, FL 33157**New Mailing Address:**9880 PALMETTO CLUB DRIVE
MIAMI, FL 33157**FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HARRIS, EMANUEL JR., DR
9880 PALMETTO CLUB DRIVE
MIAMI, FL 33157 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: HARRIS, EMANUEL, JR., DR.
Address: 9880 PALMETTO CLUB DR.
City-St-Zip: MIAMI, FL 33157

Title: SD () Delete
Name: STRINGER, CARL
Address: 18600 SW 128 CT
City-St-Zip: MIAMI, FL 33177

Title: D () Delete
Name: MCNEIL, JOHN
Address: 27237 SW 121 CT
City-St-Zip: MIAMI, FL 33032

Title: VPD () Delete
Name: MICHEL, MARCK
Address: 56 NE 46 ST
City-St-Zip: MIAMI, FL 33137

Title: D () Delete
Name: WAY, THOMAS E SR
Address: PO BOX 970772
City-St-Zip: MIAMI, FL 33197

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: MCNEIL, JOHN
Address: 27237 SW 121 CT
City-St-Zip: HOMESTEAD, FL 33032

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

Title: D (X) Change () Addition
Name: HARRIS, JOHN H
Address: 10900 SW 165 TERRACE
City-St-Zip: MIAMI, FL 33157

Title: D () Change (X) Addition
Name: MCNEIL, MICAELA K
Address: 27237 SW 121 CT
City-St-Zip: HOMESTEAD, FL 33032

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: DR. EMANUEL HARRIS JR.

PD

07/14/2006

Electronic Signature of Signing Officer or Director

Date