2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42728

FILED Apr 29, 2007 Secretary of State

Entity Name: GOULDS TEMPLE CHURCH OF GOD IN CHRIST, INC.

New Principal Place of Business: Current Principal Place of Business: 12005 SW 213TH TERRACE GOULDS, FL 33170 **Current Mailing Address: 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: Name and Address of New Registered Agent: HARRIS, EMANUEL JR., DR 9880 PALMETTO CLUB DRIVE MIAMI, FL 33157 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete HARRIS, EMANUEL, JR., , DR. Name: Name: 9880 PALMETTO CLUB DR. Address: Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip: Title: SD Title: (X) Change () Addition () Delete STRINGER, CARL Name: Name: STRINGER, CARL Address: 18600 SW 128 CT Address: 18600 SW 128 CT City-St-Zip: MIAMI, FL 33177 City-St-Zip: MIAMI, FL 33177 Title: () Delete Title: SEC (X) Change () Addition MCNEIL, JOHN MCNEIL, JOHN Name: Name: 27237 SW 121 CT 27237 SW 121 CT Address: Address: City-St-Zip: HOMESTEAD, FL 33032 City-St-Zip: HOMESTEAD, FL 33032 Title: VPD (X) Delete Title: () Change () Addition Name: MICHEL, MARCK Name: Address: 56 NE 46 ST Address: City-St-Zip: MIAMI, FL 33137 City-St-Zip: Title: () Delete Title: TRE (X) Change () Addition HARRIS, JOHN H HARRIS, JOHN H Name: Name: 10900 SW 165 TERRACE 10900 SW 165 TERRACE Address: Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip: MIAMI, FL 33157 Title: (X) Delete Title: () Change () Addition MCNEIL, MICAELA K Name: Name: Address: 27237 SW 121 CT Address: HOMESTEAD, FL 33032 City-St-Zip: 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: DR. EMANUEL HARRIS, JR. PD 04/29/2007