

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

FILED
Jul 19, 2006 8:00 am
Secretary of State

05-11-2006 90242 046 ****61.25

DOCUMENT # N92000000392 1. Entity Name FIRST CHURCH OF GOD OF LABELLE INCORPORATED					
Principal Place of Business 80 FLORIDA STREET LABELLE FL 33935 US		Mailing Address PO BOX 370 LABELLE FL 33935			
2. Principal Place of Business 80 Florida St. Suite, Apt. #, etc.		3. Mailing Address P.O. Box 370 Suite, Apt. #, etc.			
City & State LaBelle		City & State FL		4. FEI Number 59-6598960	
Zip 33975		Country Henry		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent STONE, WESLEY B. Remove 401 FIRST AVE LABELLE FL 33935				7. Name and Address of New Registered Agent Name Steve Oprnaski Street Address (P.O. Box Number is Not Acceptable) P.O. Box 370 401 First Ave LaBelle City LaBelle FL Zip Code 33975	
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 <u><i>Darlene Hernandez</i></u> Secretary (NOTE: Registered Agent sign online to avoid extra fees and delays) 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T DEESE, NELLIE 445 WHIDDEN ROAD LABELLE FL 33935	☐ Delete Trustee	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Ralph Hernandez P.O. Box 370 LaBelle FL 33975	☐ Change ☒ Addition Trustee
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T STONE, DOLLY 401 FIRST AVE. LABELLE FL	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Keith Barber Chairman 1625 CR 78 LaBelle FL 33935	☐ Change ☒ Addition Chairman
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T BARBER, DARLENE 1625 CR 78 LABELLE FL 33935	☐ Delete Trustee	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Kathleen McLean 1110 Castleton Terr LaBelle FL 33935	☐ Change ☒ Addition Trustee
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T MCLYMONT, JACOBS L P O BOX 947 LABELLE FL 33975	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CH STONE, WESLEY B REV 401 FIRST AVENUE LABELLE FL 33975	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S HERNANDEZ, DARLENE P.O. BOX 2168 LABELLE FL 33975	☐ Delete Secretary Treasurer	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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: <u><i>Darlene Hernandez</i></u> Secretary SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			4/4/06 Date		