

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
May 30, 2006
Secretary of State**

DOCUMENT# N93000003806

Entity Name: THE GOSPEL TRUTH PENTECOSTAL CHURCH, INC.**Current Principal Place of Business:**236 SW 4 ST.
HOMESTEAD, FL 33034**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 924574
PRINCETON, FL 33092**New Mailing Address:**

FEI Number: 65-0491395

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:RILEY, JULIUS L
560 NW 2ND ST.
FLORIDA CITY, FL 33034 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: RILEY, JULIUS L
Address: 560 NW 2 ST.
City-St-Zip: FLORIDA CITY, FL 33034

Title: VP () Delete
Name: BRADY, JAMES HENRY
Address: 176 SW 4 ST.
City-St-Zip: HOMESTEAD, FL 33030

Title: SD () Delete
Name: RICH BRADY, JOANN
Address: 10759 SW 226 ST.
City-St-Zip: GOULDS, FL 33170

Title: T () Delete
Name: BROWN, PRECIOUS
Address: 56 NE 9TH CT. #4
City-St-Zip: HOMESTEAD, FL 33030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: BRADY, MIKE
Address: 990 SW 7 PLACE
City-St-Zip: FLORIDA CITY, FL 33034

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

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: JULIUS RILEY

P

05/30/2006

Electronic Signature of Signing Officer or Director

Date