

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003812

FILED
Apr 30, 2009
Secretary of State

Entity Name: PALATKA FULL GOSPEL MISSION, INC.

Current Principal Place of Business:

2804 REID ST.
PALATKA, FL 32178

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2596
PALATKA, FL 32178 US

New Mailing Address:

FEI Number: 59-3214093

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEEL, MICHAEL E
1065 SOUTH MOODY ROAD
PALATKA, FL 32177 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: DP () Delete
Name: DEEL, MICHAEL E
Address: 1065 SOUTH MOODY ROAD
City-St-Zip: PALATKA, FL 32177

Title: DST () Delete
Name: DEEL, SHIRLEY D
Address: 1065 SOUTH MOODY ROAD
City-St-Zip: PALATKA, FL 32177

Title: DVP () Delete
Name: SMITH, LINDA D
Address: 158 HOOVER RD.
City-St-Zip: HOLLISTER, FL 32147

Title: D () Delete
Name: LEE, CINDY M
Address: 102 BASS DRIVE
City-St-Zip: INTERLACHEN, FL 32148

Title: D () Delete
Name: HILL, BARBARA A
Address: 6401 ST. JOHNS AVENUE, APT. 335
City-St-Zip: PALATKA, FL 32177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DVP (X) Change () Addition
Name: BACHMAN, MARK
Address: 147 BLACKJACK CIRCLE
City-St-Zip: HOLLISTER, FL 32147

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

Title: () Change () Addition
Name:
Address:
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: SHIRLEY D. DEEL

SEC

04/30/2009

Electronic Signature of Signing Officer or Director

Date