2007 NOT-FOR-PROFIT CORPORATION ANNUAL-REPORT-(AR)

FILED Mar 29, 2007 08:00 A Secretary of State DOCUMENT # N94000002358 1. Entity Name THE CHURCH OF GOD SEVENTH DAY INC. Principal Place of Business Mailing Address 3380 NW 198 TERRACE MIAMI FL 33056 3380 NW 198 TERRACE MIAMI FL 33056 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State City & State Applied For 4. FEI Number 65-0499373 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JOHNSON, ALBERT H Street Address (P.O. Box Number is Not Acceptable) 3380 N.W. 198TH TERRACE **MIAMI FL 33056** City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Florida Department of State Trust Fund Contribution. Due By May 1, 2007 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD Delete TITLE TITLE ☐ Addition ☐ Change NAME JOHNSON, ALBET H NAME STREET ADDRESS 3380 N.W. 198TH TERRACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33056** TITLE VD ☐ Deleie ☐ Change · ☐ Addition TITLE NAME NAME JOHNSON, MARJORIE E. U000000683571 STREET ADDRESS STREET ADDRESS 3380 NW 198 TERRACE 04/05/07-80051-002 61.25 CITY-ST-7IP CITY-ST-ZIP MIAMI FL HILE Delete TITLE Change Addition ÑAME NAME JOHNSON, MARJORIE E STREET ADDRESS STREET ADDRESS 3380 N.W. 198TH TERRACE CITY-SI-ZIP CITY-SI-ZIP **MIAMI FL 33056** ☐ Addition ☐ Defete TITLE П Chaлое TD NAME NAME NEWBALD, BRENDA J. STREET ADDRESS STREET ADDRESS 3380 NW 1098 TERRACE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL TITLE ☐ Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIF CITY-ST-ZIP

12. I hereby cortify 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:

Albert H. Johnson

3/27/07 305623-3386