2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# N94000002358

Entity Name: THE CHURCH OF GOD SEVENTH DAY INC.

Current Principal Place of Business:

3380 NW 198 TERRACE
MIAMI, FL 33056 US

New Principal Place of Business:

Current Mailing Address:

3380 NW 198 TERRACE
MIAMI, FL 33056 US

New Mailing Address:

FEI Number: 65-0499373 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHNSON, ALBERT H
3380 N.W. 198TH TERRACE
MIAMI, FL 33056 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: JOHNSON, ALBET H
Address: 3380 N.W. 198TH TERRACE
City-St-Zip: MIAMI, FL 33056

Title: VD ( ) Delete
Name: JOHNSON, MARJORIE E.
Address: 3380 NW 198 TERRACE
City-St-Zip: MIAMI, FL

Title: SD ( ) Delete
Name: JOHNSON, MARJORIE E
Address: 3380 N.W. 198TH TERRACE
City-St-Zip: MIAMI, FL 33056

Title: TD ( ) Delete
Name: NEWBALD, BRENDA J.
Address: 3380 NW 1098 TERRACE
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: TD (X) Change ( ) Addition
Name: NEWBOLD, BRENDA J.
Address: 3380 NW 198 TERRACE
City-St-Zip: MIAMI, FL

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: ALBERT H. JOHNSON PD 04/27/2009
Electronic Signature of Signing Officer or Director Date