

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002489

FILED
May 04, 2009
Secretary of State

Entity Name: FULL GOSPEL C-O-G-I-C HOLDING CORP., INC.

Current Principal Place of Business:

1904 EAST OSBORNE AVENUE
TAMPA, FL 33610

New Principal Place of Business:

Current Mailing Address:

PO BOX 310836
TAMPA, FL 33680

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DOUGLAS, ROBERT J
4423 48TH STREET
TAMPA, FL 33610 US

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: DOUGLAS, ROBERT J
Address: 4423 48TH STREET
City-St-Zip: TAMPA, FL 33610

Title: TC () Delete
Name: PARHAM, LARRY
Address: 1722 DARLINGTON DR.
City-St-Zip: TAMAP, FL 33619

Title: ST () Delete
Name: HEAD, GLORIA
Address: 4812 N 43RD ST
City-St-Zip: TAMPA, FL 33610

Title: T () Delete
Name: CALDWELL, DEBBRA
Address: 1820 EAST FAIRBANKS
City-St-Zip: TAMPA, FL 33607

Title: D () Delete
Name: JONES, WILLIE
Address: 4709 N 10TH APT A
City-St-Zip: TAMPA, FL 33603

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: () 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: GLORIA HEAD

ST

05/04/2009

Electronic Signature of Signing Officer or Director

Date