## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000004036

FILED Apr 30, 2009 Secretary of State

Entity Name: IN TIME CHURCH OF GOD IN CHRIST, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
1025 7TH W. PALM	STREET BEACH, FL 3	3401			
Current Mailing Address:			New Mailing Addre	New Mailing Address: P. O. BOX 245 W. PALM BEACH, FL 33402	
P. O. BOX 22771 W. PALM BEACH, FL 33416					
FEI Numbei	r: 65-0677558	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
560 S. W. BELLE GI The above		30 US	ourpose of changing its registel	red office or registered agent, or both,	
	e of Florida.				
SIGNATU	KE:				
	Electro	nic Signature of Registered Age	ent	Date	
OFFICER	Electro	nic Signature of Registered Age		Date  GES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	S AND DIREC	CTORS:  ) Delete THIA H REV. RD STREET			
Title: Name: Address: City-St-Zip: Title: Name: Address:	P ( BROWN, CYN 560 S. W. THII BELLE GLADE	Delete THIA H REV. RD STREET E, FL 33430 ) Delete TRICIA MRS. WAY	ADDITIONS/CHANG Title: Name: Address:	GES TO OFFICERS AND DIRECTORS:	
OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Address: City-St-Zip:	P ( BROWN, CYN 560 S. W. THII BELLE GLADE S ( MOORER, PA 5764 ARUBA N W. PALM BEA D ( MOORER, HAI 5764 ARUBA N	Delete THIA H REV. RD STREET E, FL 33430  ) Delete TRICIA MRS. WAY CH, FL 33407  ) Delete RRISON MR.	ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTORS:  ( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	P ( BROWN, CYN 560 S. W. THII BELLE GLADE S ( MOORER, PAT 5764 ARUBA W. PALM BEA D ( MOORER, HAI 5764 ARUBA W. WEST PALM BEA	Delete THIA H REV. RD STREET E, FL 33430  ) Delete TRICIA MRS. WAY CH, FL 33407  ) Delete RRISON MR. WAY  Delete RRISON MR. WAY  ) Delete RRISON MR. WAY  ) Delete BY MRS. STREET	ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: Address: Address:	GES TO OFFICERS AND DIRECTORS:  ( ) Change ( ) Addition  ( ) Change ( ) Addition	

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: CYNTHIA H. BROWN P 04/30/2009