2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004766

FILED Apr 29, 2006 Secretary of State

Entity Name: THE FIRST APOSTOLIC ASSEMBLY OF JESUS CHRIST, INC.

Current Principal Place of Business: New Principal Place of Business: 477 SOUTH BARFIELD HIGHWAY PAHOKEE, FL 33476 **Current Mailing Address: New Mailing Address:** 120 MIRAMAR AVE ROYAL PALM BEACH, FL 33411 FEI Number: 65-0581708 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JONES, LINDA M 120 MIRAMAR AVE ROYAL PALM BEACH, FL 33411 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HARRIS, EDWARD A Name: Name: 430 N COCONUT RD Address: Address: City-St-Zip: PAHOKEE, FL 33476 City-St-Zip: Title: VD () Delete Title: () Change () Addition HARRIS, MESHACH B Name: Name: Address: 436 SAGO COURT Address: City-St-Zip: PAHOKEE, FL 33476 City-St-Zip: Title: ASD () Delete Title: () Change () Addition HARRIS, SARAH R Name: Name: Address: 430 N COCONUT RD Address: City-St-Zip: PAHOKEE, FL 33476 City-St-Zip: Title: DT () Delete Title: () Change () Addition Name: BARR, VALRIE M Name: Address: 781 PALM BLVD. Address: City-St-Zip: PAHOKEE, FL 33476 City-St-Zip: Title: () Delete Title: SD (X) Change () Addition JONES, LINDA M MITCHELL, LINDA M Name: Name: 120 MIRAMAR AVE 120 MIRAMAR AVE Address: Address: City-St-Zip: ROYAL PALM BEACH, FL 33411 City-St-Zip: ROYAL PALM BEACH, FL 33411 Title: () Delete Title: () Change () Addition BONNER, ANTHONY Name: Name: Address: 509 WEST EPASO AVENUE Address: CLEWISTON, FL 33440 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LINDA M. MITCHELL SD 04/29/2006