


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2007 08:00 A
Secretary of State

DOCUMENT # N95000000055 1. Entity Name HARDAWAY ASSEMBLY OF GOD, INC.	
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Principal Place of Business 2914 PINE GROVE CH RD QUINCY, FL 32351	Mailing Address 2914 PINE GROVE CH RD QUINCY, FL 32351
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DO NOT WRITE IN THIS SPACE



03212007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 65-0564910	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BRASWELL, PEARL E 2914 PINE GROVE CHURCH ROAD QUINCY, FL 32351-5465

**DO NOT WRITE
IN THIS SPACE**

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RYALS, ROBIN A 66 N. VIRGINIA ST. QUINCY, FL 32351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEAN, JOHN H 756 MCFALL DR CHATTAHOOCHEE, FL 32324
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANDLER, TOMMY W 10632 BLUESTAR HWY QUINCY, FL 32352
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

U00000708687
04/24/07-80123-018 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Tommy W. Sandler</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<u>4-10-2007</u> <small>Date</small>	<u>850-508-2224</u> <small>Daytime Phone #</small>
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