

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000001021

**FILED**  
**Feb 17, 2010**  
**Secretary of State**

**Entity Name:** SHIVERS TEMPLE CHURCH OF GOD IN CHRIST, INC.

**Current Principal Place of Business:**

1518 NW 17TH AVE.  
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

**Current Mailing Address:**

1518 NW 17TH AVE.  
POMPANO BEACH, FL 33069

**New Mailing Address:**

**FEI Number:** 65-0565265

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

SHOWERS, RAYFIELD  
4752 NW 6TH PLACE  
COCONUT CREEK, FL 33063 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:** S  
**Name:** GRANISON, APRYL  
**Address:** 6356 WILLOW BAY CIRCLE  
**City-St-Zip:** LAKE WORTH, FL 33463

**Title:** FS  
**Name:** SHIVERS, JOAN  
**Address:** 507 NW 7TH AVE  
**City-St-Zip:** POMPANO BEACH, FL 33060

**Title:** T  
**Name:** BRYANT, GLORIA  
**Address:** 1651 NW 6TH AVE.  
**City-St-Zip:** POMPANO BEACH, FL 33060

**Title:** VP  
**Name:** RAYMOND, SHOWERS  
**Address:** 1601 NW 15TH CT  
**City-St-Zip:** POMPANO BEACH, FL 33060

I hereby 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 all other like empowered.

**SIGNATURE:** RAYFIELD SHOWERS

**PRES**

**02/17/2010**

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date