2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

12. I hereby cortify that the information supplied with this filin indicated on this report or supplemental report is true and

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if changed, or on an a

SIGNATURE

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Apr 13, 2007 08:00 AM Secretary of State DOCUMENT # N95000005690 LOGOS DIVINE ANOINTED MINISTRIES CHURCH, INC. Principal Place of Business Mailing Address 1202 S. RIDGEWOOD AVE P O BOX 6028 DAYTONA BEACH FL 32114 DAYTONA BEACH FL 32122 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & Stato City & State 4. FEI Numbor Applied For 59-3361865 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desirod Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MOBLEY, RODERICK D REV. Stroot Address (P.O. Box Number is Not Acceptable) 463 NORTH PLEASANT ST DAYTONA BEACH FL 32114 Zip Codo 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 Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstaling) FILE NOW: FEE IS \$61:25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 0100 Delete HILLE Change Addition NAME MOBLEY, RODERICK D NAME STREET ADDRESS 463 N. PLEASANT ST STREET ADDRESS U00000706786 CITY-ST-ZIP DAYTONA BEACH FL 32114 CITY-S1-7IP ☐ Delete ItItI Addition NAME MOBLEY, SANDRA G NAME STREET ADDRESS STREET ADDRESS 463 N. PLEASANT ST CITY-ST-ZIP DAYTONA BEACH FL 32114 CITY-ST-7IP ☐ Addiiion~ KHI. ☐ Delete 📋 ¢hange NAME GILLIS, DERRICK C NAME STREET ADDRESS STREET ADORESS 667 WESST DAYTON CIRCLE CITY - ST - ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33312 Defete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP HIRE Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ANDRESS *CITY - ST - ZIP CHY-ST-ZIP HHE Delete DILE Change Addillon NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-7IP

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tained in Section 119, Florida Statutes. I further certify that the information

8/07 (386) 253-4405

gnature shall have the same legal effect as if made under eath; that I am an officer or director required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11