

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2005 8:00 am
Secretary of State

01-28-2005 90029 044 ****61.25

DOCUMENT # N96000000580

1. Entity Name
**PALM BAY COMMUNITY GOSPEL TRUTH CHURCH OF
GOD, INC.**



Principal Place of Business
**3507 CARRIAGE GATE DRIVE
MELBOURNE, FL 32902**

Mailing Address
**700 VEGA COURT NE
PALM BAY, FL 32907**

50007657



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01052005 Chg-NP

CR2E037 (10/03)

4. FEI Number
59-3357662

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 if applicable.

(NOTE: Registered Agent signature required when rehashing)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME DUNCAN, ELISHA A
STREET ADDRESS 700 VEGA COURT NORTHEAST
CITY-ST-ZIP PALM BAY, FL 32907

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☒ Delete
NAME DUNCAN, NORMAN
STREET ADDRESS 2830 RIVER PONTE DRIVE
CITY-ST-ZIP ORLANDO, FL 32825

TITLE VP ☒ Change ☐ Addition
NAME Fitzgerald, Lawrence
STREET ADDRESS 1390 Ashboro Cir. SE Palm Bay 32909
CITY-ST-ZIP

TITLE D ☒ Delete
NAME THOMAS, CARMEN
STREET ADDRESS 728 BOEING STREET NE
CITY-ST-ZIP PALM BAY, FL 32907

TITLE D ☒ Change ☐ Addition
NAME Maria, Lawrence
STREET ADDRESS 1390 Ashboro Cir. SE Palm Bay
CITY-ST-ZIP Fla. 32909

TITLE D ☒ Delete
NAME LAWRENCE, FITZGERALD O
STREET ADDRESS 1390 ASHBOTO CIR. SE
CITY-ST-ZIP PALM BAY, FL 32909

TITLE D ☒ Change ☐ Addition
NAME Annie Duncan
STREET ADDRESS 700 Vega Ct. NE Palm Bay
CITY-ST-ZIP Fla. 32907

TITLE S ☒ Delete
NAME LAWRENCE, MARIA I
STREET ADDRESS 1390 ASHBOTO CIR. SE
CITY-ST-ZIP PALM BAY, FL 32909

TITLE S ☒ Change ☐ Addition
NAME Elsie McGillvery
STREET ADDRESS 751 Walden Blvd. Palm Bay
CITY-ST-ZIP Fla. 32909

TITLE T ☒ Delete
NAME DUNCAN, ANNIE
STREET ADDRESS 700 VEGA COURT NE
CITY-ST-ZIP PALM BAY, FL 32907

TITLE T ☒ Change ☐ Addition
NAME Harris McGillvery
STREET ADDRESS 751 Walden Blvd. Palm Bay
CITY-ST-ZIP Fla. 32909

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Elisha A. Duncan* *Elisha A. Duncan*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 24, 05 *321-951-4489*

Date

Daytime Phone #