

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000721

FILED  
Jan 21, 2010  
Secretary of State

**Entity Name:** THE COMMUNITY CHURCH OF GOD OF JOHNSON, FLORIDA, INC.

**Current Principal Place of Business:**

423 SO. C.R. 21  
HAWTHORNE, FL 32640

**New Principal Place of Business:**

**Current Mailing Address:**

423 SO. C.R. 21  
HAWTHORNE, FL 32640 US

**New Mailing Address:**

PO BOX 1742  
HAWTHORNE, FL 32640 US

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

DOWLING, ROBERT W  
423 SO. C.R. 21  
HAWTHORNE, FL 32640 US

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

DOWLING, ROBERT  
423 SO. C.R. 21  
HAWTHORNE, FL 32640 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: ROBERT DOWLING

01/21/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: PEARSON, PASTOR CARLEY  
Address: 133 LYONS LAKE LANE  
City-St-Zip: HAWTHORNE, FL 32640

Title: VPD  
Name: DOWLING, ROBERT  
Address: 147 VAUSE LAKE ROAD  
City-St-Zip: HAWTHORNE, FL 32640

Title: ST  
Name: PITT, TAMMY  
Address: PO BOX 173  
City-St-Zip: HAWTHORNE, FL 32640

Title: T  
Name: PITT, TAMMY  
Address: PO BOX 173  
City-St-Zip: HAWTHORNE, FL 32640

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: PASTOR CARLEY PEARSON

PD

01/21/2010

Electronic Signature of Signing Officer or Director

Date