## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## ANNUAL REPORT DOCUMENT # N96000002379

1. Entity Name

BEULAH CHAPEL ASSEMBLY OF GOD, INC.

FILED Jan 16, 2007 08:00 AN Secretary of State

Principal Place of Business

2311 HIGHWAY 4A CENTURY, FL 32535 Mailing Address

2311 HIGHWAY 4A CENTURY, FL 32535



01042007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 59-3013341

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WHITE, JOHN 7730 DOGWOOD LANE CENTURY, FL 32535

SIGNATURE: X

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					<u> </u>
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  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  STATE  STATE  ON White Projection of Registered Agent eignature required when remaining the purpose of 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, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
Filing Fee is \$61.25 9. Election Campaign Financing Due by May 1, 2007 Trust Fund Contribution.			scing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT WHITE, JOHN 7730 DOGWOOD LANE CENTURY, FL 32535			_	
TITLE NAME STREET ADDRESS CHY-ST-ZIP	VPT JOHNSON, DANNY 305 MCCURDY STREET FLOMATON, AL 36441				##00000586560 UT/16/07-80057-016 61.25
TITLE NAME STREET ADDRESS CATY-ST-ZIP	T STEADHAM, MYRA 333 THREE MILE ROAD, #1 ATMORE, AL 36502		DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BURKETT, JOYCE 1650 MORGAN ROAD CENTURY, FL 32535				
TITLE HAME STREET ADDRESS CITY-ST-ZIP	-				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					·
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 cath; 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.					

OF SIGNING OFFICER OR DIRECTOR