

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 07, 2004 8:00 am**  
**Secretary of State**

04-07-2004 90046 002 \*\*\*\*61.25

<b>DOCUMENT # N96000005113</b> 1. Entity Name <b>FULL GOSPEL MISSIONS FELLOWSHIP CHURCH, INC.</b>					
Principal Place of Business <b>2886 HAVENDALE BLVD WINTER HAVEN FL 33881</b>			Mailing Address <b>122 LAKE SEARS DR SW WINTER HAVEN FL 33880-1227</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>59-3403472</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>BROWN, RICHARD L SR 122 LAKE SEARS DR SW WINTER HAVEN FL 33880-1227</b>				Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ <b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make Check Payable to Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	DP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>BROWN, RICHARD L SR</b>		NAME		
STREET ADDRESS	<b>122 LAKE SEARS DR SW</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>WINTER HAVEN FL 33880-1227</b>		CITY-ST-ZIP		
TITLE	DV	<input checked="" type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>PARKER, DOUGLAS J</b>		NAME	<b>DEAN JOHN C.</b>	
STREET ADDRESS	<b>526 ASHLEY RD</b>		STREET ADDRESS	<b>2050 THELMA DR</b>	
CITY-ST-ZIP	<b>POLK CITY FL 33869</b>		CITY-ST-ZIP	<b>WINTER HAVEN, FL 33891</b>	
TITLE	DS	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>HINES, MARY H</b>		NAME		
STREET ADDRESS	<b>109 HOWARD ST</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>AUBURNDALE FL 33823</b>		CITY-ST-ZIP		
TITLE	DT	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>BROWN, SARAH H</b>		NAME		
STREET ADDRESS	<b>122 LAKE SEARS DR SW</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>WINTER HAVEN FL 33880-1227</b>		CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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.					
<b>SIGNATURE: <i>Richard L. Brown, Sr.</i> RICHARD L. BROWN, SR</b>			<b>5 APRIL 2004 863-287-9401</b>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		