2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 20, 2005 08:00 AM Secretary of State DOCUMENT # N96000005113 1. Entity Name FULL GOSPEL MISSIONS FELLOWSHIP CHURCH, INC. Mailing Address Principal Place of Business _____ 122 LAKE SEARS DR SW WINTER HAVEN FL 33880-1227 2886 HAVENDALE BLVD WINTER HAVEN FL 33881 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) Applied For City & State 4. FEI Number City & State 59-3403472 Not Applicable Country Zip \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BROWN, RICHARD L SR Street Address (P.O. Box Number is Not Acceptable) 122 LAKE SEARS DR SW WINTER HAVEN FL 33880-1227 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 apolicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61,25 9. Election Campaign Financing Make Check Pavable to **\$5.00** May Be Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2005 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. DP ☐ Change Addition THE F TITLE Delete BROWN, RICHARD L SR NAME MAME 122 LAKE SEARS DR SW STREET ADDRESS STREET ADDRESS WINTER HAVEN FL 33880-1227 CITY-ST-ZIP CITY-ST-ZIP मग ह ☐ Change ☐ Addition TITLE Delete DEAN, JOHN C NAME U00000318177 04/20/05-80049-010 61.25 2050 THELMA DR. STREET ADDRESS STREET ADDRESS WINTER HAVEN FL 33881 CITY - ST - ZIP CITY-ST-78 DS Change Addition TITLE Delete DILE HINES, MARY H NAME NAME 109 HOWARD ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP AUBURNDALE FL 33823 CITY-SE ZIP ☐ Change Addition Delele TITLE DILLE BROWN, SARAH H NAME 122 LAKE SEARS DR SW STREET ADDRESS STREET ADDRESS WINTER HAVEN FL 33880-1227 CITY ST-ZIP CITY-ST-ZIP Addition Delete 3.1117 ☐ Change HILE MANAG NAME STREET ADDRESS STREET ADDRESS CHY-ST ZIP CITY-ST-ZIP Addition Addition TITLE □ Change THE Delete NAME NAME STREET AUDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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12. Thereby certify that the information supplied with this filling 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: RICHARD C. BROWN, SZ. 4/13/05 063-297-940/