

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 28, 2005
Secretary of State**

DOCUMENT# N97000000761

Entity Name: THE ST. MARK CHURCH OF GOD IN CHRIST, INC.

Current Principal Place of Business:

57 EAST HANNAH CIRCLE
PENSACOLA, FL 32534

New Principal Place of Business:

Current Mailing Address:

6418 WAGNER ROAD
PENSACOLA, FL 32505

New Mailing Address:

FEI Number: 59-3421730 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JONES, HORACE SR.
6418 WAGNER ROAD
PENSACOLA, FL 32503 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JONES, HORACE SR
Address: 6418 WAGNER ROAD
City-St-Zip: PENSACOLA, FL 32503

Title: VPD () Delete
Name: JONES, HORACE JR
Address: 6418 WAGNER ROAD
City-St-Zip: PENSACOLA, FL 32503

Title: SD () Delete
Name: GULLY, CHERYL
Address: 7335 DUMONDE PLACE
City-St-Zip: PENSACOLA, FL 32505

Title: TD () Delete
Name: WILLIAMS, PERCY
Address: 3214 NORTH ROOSEVELT STREET
City-St-Zip: PENSACOLA, FL 32503

Title: LFO () Delete
Name: JONES, KENNETH
Address: 6218 BINENVILLE DRIVE
City-St-Zip: PENSACOLA, FL 32505

Title: LFO () Delete
Name: RICHBURG, DARYL C
Address: 1315 EAST LEONARD
City-St-Zip: PENSACOLA, FL 32503

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: HORACE JONES JR

VPD

04/28/2005

Electronic Signature of Signing Officer or Director

Date