


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N97000003247	
1. Entity Name ST. JOHN CHURCH OF GOD IN CHRIST, INC.	

Principal Place of Business 43 DREW ELLIS LANE QUINCY, FL 32351	Mailing Address 43 DREW ELLIS LANE QUINCY, FL 32351
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent MCCLOUD, RONALD L 108 ASTOR AVE QUINCY, FL 32351

DO NOT WRITE
IN THIS SPACE

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 applicable. (NOTE: Registered Agent signature required when reinstating)	DATE _____
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Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD COOK, CHARLIE 2355 WOODWARD ROAD QUINCY, FL 32352
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MCCLOUD, RONALD L 108 ASTOR AVE. QUINCY, FL 32351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RAY, FANNIE M RT 2 BOX 370 - ANGLE ST. QUINCY, FL 32351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ELLIS, ALFORD 111 DREW ELLIS LANE QUINCY, FL 32351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KELLY, CATHERINE 1165 RONS POINTE DRIVE EAST TALLAHASSEE, FL 32312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

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 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:  (PD) Ronald McCloud	Date: 5/1/07	Daytime Phone #: 414-4430
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FILED

07 MAY -1 PM 2: 18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



05012007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3453342	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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