

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004145

FILED
Apr 25, 2005
Secretary of State

Entity Name: GREATER DIMENSIONS CHRISTIAN ASSEMBLY, INC.

Current Principal Place of Business:

1680 DUNN AVENUE SUITE 2
JACKSONVILLE, FL 32218 US

New Principal Place of Business:

Current Mailing Address:

2443 AUBREY AVENUE
JACKSONVILLE, FL 32208 US

New Mailing Address:

FEI Number: 59-3454075

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CURINGTON, DEBRA DR.
2443 AUBREY AVENUE
JACKSONVILLE, FL 32208 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: D () Delete
Name: BOYD, CHARLENE
Address: 8401 GRAMPELL DRIVE
City-St-Zip: JACKSONVILLE, FL 32221 US

Title: D () Delete
Name: PARKER, JOHNNIE M
Address: 1104 WEARE STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: D () Delete
Name: POPE, BETTYE B
Address: 7507 BEACH BLVD.
City-St-Zip: JACKSONVILLE, FL 32207

Title: P () Delete
Name: CURINGTON, DEBRA
Address: 2443 AUBREY AVENUE
City-St-Zip: JACKSONVILLE, FL 32208

Title: D () Delete
Name: OWENS, GWENDOLYN
Address: 588 WHITFIELD ROAD
City-St-Zip: JACKSONVILLE, FL 32221

Title: D () Delete
Name: INGS, JAMES
Address: 1828 DAYTONA LANE NORTH
City-St-Zip: JACKSONVILLE, FL 32218

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: DR. DEBRA CURINGTON

CEO

04/25/2005

Electronic Signature of Signing Officer or Director

Date