


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2008 08:00 AM
Secretary of State

DOCUMENT # N97000004271

1. Entity Name
THE CHURCH OF GOD FELLOWSHIP MINISTRIES INC.



Principal Place of Business 1770 N.W. 135TH STREET MIAMI, FL 33167	Mailing Address 1770 N.W. 135TH STREET MIAMI, FL 33167
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DO NOT WRITE IN THIS SPACE



01052008 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0779654	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**WILLIAMS, FESTUS E REV.
 1770 N.W. 135TH STREET
 MIAMI, FL 33167**

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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 _____ (NOTE: Registered Agent signature required when retitling) DATE _____

**Filing Fee Is \$61.25
 Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, FESTUS E 1770 N.W. 135TH STREET MIAMI, FL 33167
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, SYBIL 1770 N.W. 135TH STREET MIAMI, FL 33167
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FORBES, MARY 2941 N.W. 152 TERRACE MIAMI, FL 33054
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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U00000842039
 03/11/08-80012-007 61.25

U00000842039
 03/11/08-80012-008 8.75

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: D. Festus Williams **02-22-08** **305-685-1399**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #