


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 14, 2006 8:00 am**  
**Secretary of State**

04-14-2006 90140 020 \*\*\*\*70.00

<b>DOCUMENT # N97000006184</b> 1. Entity Name <b>BEREAN CHURCH OF GOD INTERNATIONAL, INC.</b>					
Principal Place of Business P.O. BOX 7840 PORT ST LUCIE, FL 34953			Mailing Address P.O. BOX 7840 PORT ST LUCIE, FL 34953		
2. Principal Place of Business <b>2262 S.E. MASLAN AVE.</b> Suite, Apt. #, etc.			3. Mailing Address <b>2262 S.E. MASLAN AVE.</b> Suite, Apt. #, etc.		
City & State <b>PORT ST. LUCIE FL.</b> Zip <b>34952</b>		City & State <b>PORT ST. LUCIE FL.</b> Zip <b>34952</b>		4. FEI Number <b>52-2166172</b>	
Country <b>U.S.A.</b>		Country <b>U.S.A.</b>		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>JACKSON, EPHRAIM A REV</b> <b>2262 SOUTH EAST MASLAN AVE.</b> <b>PORT ST LUCIE, FL 34952</b>				7. Name and Address of New Registered Agent Name <b>EPHRAIM A. JACKSON</b> Street Address (P.O. Box Number is Not Acceptable) <b>2262 S.E. MASLAN AVE.</b> City <b>PORT ST. LUCIE</b> FL <b>34952</b>	
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 <u><i>Ephraim A. Jackson</i></u> DATE <u><i>4/11/06</i></u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be</b> <b>Added to Fees</b>	
<b>Make check payable to</b> <b>Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUBINSON, CHARLES E REV 4241 NW 19TH STREET FT LAUDERDALE, FL 33313	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, CARLTON REV 217 MOUNTAINBERRY RD BRAMPTON, ONTARIO, ON L6R1W3	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACKSON, EPHRAIM REV 2262 SOUTH EAST MASLAN AVE PT ST LUCIE, FL 34952	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCCALLA, CLAUDINE 88 CORPORATE DRIVE SUITE 1609 TORONTO, ONTARIO, ON L6R1W3	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILSON, ALDEN 217 MOUNTAINBERRY ROAD BAMPTON, ONTARIO, ON L6R1W3	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOUISE A. HENRY 5120 N.W. 64 TERRACE FORT LAUDERDALE FL 33319 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D [Blank]	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DWIGHT POWELL 5159 SPANISH OAKS DRIVE LAKELAND FL 33805 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
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: <u><i>Ephraim A. Jackson</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <u><i>4/11/06</i></u> <small>Daytime Phone #</small>		