2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006507

FILED Feb 02, 2012 Secretary of State

Entity Name: FIRST ASSEMBLY OF GOD OF CROSS CITY INC.

Current Principal Place of Business: New Principal Place of Business:

HIGHWAY 351 NORTH 2185 HIGHWAY 351 NORTH CROSS CITY, FL 326282007 CROSS CITY, FL 326282007

Current Mailing Address: New Mailing Address:

P.O. BOX 620 2185 HIGHWAY 351 NORTH CROSS CITY, FL 326282007 CROSS CITY, FL 326282007

FEI Number: 36-4226610 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HODGES, ANN G CPA
85 NE 126TH STREET
CROSS CITY, FL 32628 US
HODGES, ANNE G CPA
85 NE 126TH STREET
CROSS CITY, FL 32628 US

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: ANNE G HODGES, CPA 02/02/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Γitle: BM

Name: MEHAFFEY, A.D.

Address: P.O. BOX 835 (208 SE 21ST AVE)

City-St-Zip: CROSS CITY, FL 32628

Title: T

Name: DAMPIER, VALERIE
Address: 1681 NE 206 AVENUE
City-St-Zip: OLD TOWN, FL 32680

Title: BM

Name: REVELS, CLIFFORD H Address: 2885 NE 272 AVENUE City-St-Zip: OLD TOWN, FL 32680

Title: BM

Name: BASS, WILLIAM Address: P O BOX 603

City-St-Zip: CROSS CITY, FL 32628 US

Title: BM

 Name:
 CARR, JOHN V

 Address:
 462 NE 660 STREET

 City-St-Zip:
 OLD TOWN, FL 32680 US

I hereby 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 all other like empowered.

SIGNATURE: VALERIE DAMPIER TRES 02/02/2012