

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006898

FILED
Mar 24, 2006
Secretary of State

Entity Name: THE ETERNAL GUIDING LIGHT FAITH MINISTRIES AND COMMUNITY DEVELOPMENT CORPORATION, INC.

Current Principal Place of Business:

2420 NW 6 ST
POMPAN0 BEACH, FL 33069 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 666836
POMPAN0 BEACH, FL 33066

New Mailing Address:

FEI Number: 65-0798165

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCLEOD, GARY B
2420 NW 6 ST
POMPAN0 BEACH, FL 33069 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: DERICO, CHARLES
Address: 2551 NW 5TH ST.
City-St-Zip: POMPAN0 BEACH, FL 33069

Title: D () Delete
Name: HUNTER, WALTER
Address: 1250 NW 27 AVE.
City-St-Zip: POMPAN0 BEACH, FL 33069

Title: D () Delete
Name: BYNUM, JANICE
Address: 2413 NW 6 STREET
City-St-Zip: POMPAN0 BEACH, FL 33069

Title: T () Delete
Name: JACKSON, JOYCE
Address: 360 NW 14 STREET
City-St-Zip: POMPAN0 BEACH, FL 33060

Title: T () Delete
Name: TALTON, JOHNNY L
Address: 2651 NW 2 STREET
City-St-Zip: POMPAN0 BEACH, FL 33069

Title: T () Delete
Name: PHOENIX, PAMELA
Address: 5910 N.E. 1ST AVE.
City-St-Zip: FORT LAUDERDALE, FL 33334

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCCLEOD, GARY B
Address: 2420 NW 6 STREET
City-St-Zip: POMPAN0 BEACH, FL 33069

Title: VP (X) Change () Addition
Name: MCCLEOD, SYNTHIA Y
Address: 2420 NW 6 STREET
City-St-Zip: POMPAN0 BEACH, FL 33069

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: JACKSON, JOYCE
Address: 360 NW 14 STREET
City-St-Zip: POMPAN0 BEACH, FL 33060

Title: T (X) Change () Addition
Name: NOIRD, DONNA
Address: 825 NORTH POWERLINE ROAD
City-St-Zip: POMPAN0 BEACH, FL 33069

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 Chapter 119, 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: GARY B. MCCLEOD

P

03/24/2006

Electronic Signature of Signing Officer or Director

Date