# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 29, 2008**
**Secretary of State**

DOCUMENT# N98000002440

**Entity Name:** NEW SPIRIT FULL GOSPEL WORD CHURCH INC

**Current Principal Place of Business:**

4511 SOUTEL DRIVE
JACKSONVILLE, FL 32208 US

**New Principal Place of Business:**

**Current Mailing Address:**

1068 PEBBLE RIDGE DRIVE
JACKSONVILLE, FL 32220 US

**New Mailing Address:**

**FEI Number: 59-3510767** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**

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

GILBERT, FOREST JR.
1068 PEBBLE RIDGE DRIVE
JACKSONVILLE, FL 32220 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: GILBERT, WILHELMENIA
Address: 1068 PEBBLE RIDGE DR
City-St-Zip: JACKSONVILLE, FL 32220

Title: T ( ) Delete
Name: GILBERT, ROSALYN
Address: 9011 DEVON SHIRE BLVD.
City-St-Zip: JACKSONVILLE, FL 32208

Title: T ( ) Delete
Name: TUNSIL, MARIE
Address: 1122 W 6TH ST
City-St-Zip: JACKSONVILLE, FL 32209

**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:

I hereby certify that the information supplied with this filing does not qualify 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: WILHELMENIA GILBERT D 05/29/2008
Electronic Signature of Signing Officer or Director — Date