

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002807

FILED  
Apr 20, 2005  
Secretary of State

**Entity Name:** THE JOY OF LIVING CHURCH OF GOD, INC

**Current Principal Place of Business:**

455 N HAVERHILL RD  
WEST PALM BEACH, FL 33415

**New Principal Place of Business:**

**Current Mailing Address:**

455 N HAVERHILL RD  
WEST PALM BEACH, FL 33415

**New Mailing Address:**

**FEI Number:** 65-0791750

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DOUGLAS, EUSTACE  
127 SYCAMORE DR  
ROYAL PALM BEACH, FL 33411 US

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

DOUGLAS, EUSTACE  
268 PINE AVENUE  
WEST PALM BEACH, FL 33413 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: \_\_\_\_\_

04/20/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DOUGLAS, EUSTACE  
Address: 3909 HEATH CIRCLE NORTH  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D ( ) Delete  
Name: WORRELL, EDNA  
Address: 637 CASHIERS DR.  
City-St-Zip: WEST PALM BEACH, FL 33413

Title: D ( ) Delete  
Name: DOUGLAS, IRIS  
Address: 3909 HEATH CIRCLE NORTH WEST  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D ( ) Delete  
Name: MOORE, CYNTHIA  
Address: 2348 PAR RD  
City-St-Zip: WEST PALM BEACH, FL 33409

**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:

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 Section 119.07(3)(i), 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: IRIS DOUGLAS

D

04/20/2005

Electronic Signature of Signing Officer or Director

Date