2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004423

Entity Name: SHEKINAH GLORY OF GOD, INC.

FILED May 18, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: P. O. BOX 16546 PANAMA CITY, FL 32406 **Current Mailing Address: New Mailing Address:** P. O. BOX 16546 PANAMA CITY, FL 32406 FEI Number: 59-3487924 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) 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: Name and Address of New Registered Agent: LANEY, MARY B 1611 FÁIRLAND AVE PANAMA CITY, FL 32405 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete DELOACH, TEARETHA Name: Name: 1327 FAIRLAND AVE. Address: Address: City-St-Zip: PANAMA CITY, FL 32401 City-St-Zip: Title: () Delete Title: () Change () Addition DAVIS, BILLY J JR. Name: Name: Address: 1610 FRANKFORD AVE. Address: City-St-Zip: PANAMA CITY, FL 32405 City-St-Zip: Title: (X) Delete Title: () Change () Addition JONES, DANIEL Name: Name: 1507 WILMONT AVE. Address: Address: City-St-Zip: PANAMA CITY, FL 32405 City-St-Zip: () Delete Title: Title: () Change () Addition Name: JONES, MARY ALICE Name: 1516 MICHIGAN AVE Address: Address: City-St-Zip: LYNN HAVEN, FL 32444 City-St-Zip: Title: () Delete Title: (X) Change () Addition MCQUEEN, RENEE MCQUEEN, RENEE Name: Name: 1208 EMORY DR. 1 RYBARK LANE Address: Address: City-St-Zip: PANAMA CITY, FL 32405 City-St-Zip: PALM COAST, FL 32164 Title: () Delete Title: (X) Change () Addition JONES, BONNIE LANEY, MARY B Name: Name: Address: 1507 WILMONT AVE. Address: 1611 FAIRLAND AVE PANAMA CITY, FL 32405 PANAMA CITY, FL 32405 City-St-Zip: 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: BILLY J. DAVIS, JR. PRES 05/18/2008