

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006461

FILED
Aug 16, 2006
Secretary of State

Entity Name: LAND OF CANAAN CHURCH OF GOD INC.

Current Principal Place of Business:

324 NEW YORK DRIVE
FT MYERS, FL 33905

New Principal Place of Business:

4151 PALM LANE
FT MYERS, FL 33905

Current Mailing Address:

324 NEW YORK DRIVE
FT MYERS, FL 33905

New Mailing Address:

4151 PALM LANE
FT MYERS, FL 33905

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

JOHNSON, DUANE
324 NEW YORK DRIVE
FT MYERS, FL 33905 US

Name and Address of New Registered Agent:

JOHNSON, DUANE
4151 PALM LANE
FT MYERS, FL 33905 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

08/16/2006

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JOHNSON, DUANE
Address: 324 NEW YORK DR.
City-St-Zip: FT. MYERS, FL 33905

Title: D () Delete
Name: JOHNSON, TIMOTHY O
Address: 4934 OCEAN ST.
City-St-Zip: FT. MYERS, FL 33905

Title: T () Delete
Name: JOHNSON, KATHY
Address: 324 NEW YORK DR.
City-St-Zip: FT. MYERS, FL 33905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JOHNSON, DUANE
Address: 4151 PALM LANE
City-St-Zip: FT. MYERS, FL 33905

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

Title: T (X) Change () Addition
Name: JOHNSON, KATHY
Address: 4151 PALM LANE
City-St-Zip: FT. MYERS, FL 33905

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: DUANE JOHNSON

D

08/16/2006

Electronic Signature of Signing Officer or Director

Date