

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007235

FILED  
Apr 25, 2006  
Secretary of State

**Entity Name:** ST. JOHN CHURCH OF GOD IN CHRIST MINISTRIES, INC.

**Current Principal Place of Business:**

285 LAKE VIEW BLVD  
COCOA, FL 32926

**New Principal Place of Business:**

**Current Mailing Address:**

285 LAKE VIEW BLVD  
COCOA, FL 32926

**New Mailing Address:**

**FEI Number:** 59-3627885

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DUNN, ADAM  
4615 NICOLE AVE  
COCOA, FL 32927 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: VC ( ) Delete  
Name: DUNN, ADAM  
Address: 4615 NICOLE AVE  
City-St-Zip: COCOA, FL 32927

Title: T ( ) Delete  
Name: WYNN, JOHN  
Address: 817 HOWARD ST.  
City-St-Zip: ROCKLEDGE, FL 32955

Title: AT ( ) Delete  
Name: GLENN, AMOS  
Address: 2527 STRATFORD DR.  
City-St-Zip: COCOA, FL 32926

Title: D ( ) Delete  
Name: THOMAS, LEON  
Address: 3355 AMBERLY ST.  
City-St-Zip: COCOA, FL 32926

Title: D ( ) Delete  
Name: JONES, CAROLYN  
Address: 1115 SANTA ROSA DR  
City-St-Zip: ROCKLEDGE, FL 32955

Title: D ( ) Delete  
Name: WYNN, SIPPO  
Address: 833 LEVITT PARKWAY  
City-St-Zip: ROCKLEDGE, FL 32955

**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:

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 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: GLENN, AMOS

AT

04/25/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date