

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001173

FILED
Feb 26, 2005
Secretary of State

Entity Name: SHAMMAH OF GOD WORSHIP CENTER, INC.

Current Principal Place of Business:

1446 25TH ST. SW
VERO BEACH, FL 32962

New Principal Place of Business:

Current Mailing Address:

1446 25TH ST. SW
VERO BEACH, FL 32962

New Mailing Address:

FEI Number: 65-0896659

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEARCE, VOLTAIRE G SR.
1446 25TH ST. SW
VERO BEACH, FL 32962 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: SD () Delete
Name: SMITH, JEWEL
Address: 1396 24TH ST SW
City-St-Zip: VERO BEACH, FL 32962

Title: D () Delete
Name: PIERCE, JOSEPH J SR
Address: 607 CARVER DR
City-St-Zip: LAKE WALES, FL 33853

Title: TD () Delete
Name: SWEET, MAGDALENE
Address: 1471 SANDUSKY ST SE
City-St-Zip: PALM BAY, FL 32909

Title: D () Delete
Name: GORDON, BLONDELL
Address: 1371 NOLAND ST NE
City-St-Zip: PALM BAY, FL 32907

Title: VD () Delete
Name: PEARCE, JIM
Address: 719 KIRK AVE P.O. BOX 575
City-St-Zip: BROWNSVILLE, OR 97327

Title: D (X) Delete
Name: PIERCE, SAM
Address: 749 HAZELTINE AVE SE
City-St-Zip: SALEM, OR 973061755

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 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: VOLTAIRE G. PEARCE SR.

PRES

02/26/2005

Electronic Signature of Signing Officer or Director

Date