2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 14, 2006 8:00 am **Secretary of State** DOCUMENT # N99000002820 1. Entity Name 03-14-2006 90025 020 ****61.25 CENTRAL ALLIANCE CHURCH OF THE CHRISTIAN AND MISSIONARY ALLIANCE, INC. Mailing Address Principal Place of Business CENTRAL ALLIANCE CHURCH CENTRAL ALLIANCE CHURCH 777 N.W. 106TH ST. MIAMI FL 33150 777 N.W. 106TH ST. MIAMI FL 33150 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State Applied For 4. FEI Number 59-1050681 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name EVANS, JUDITH S Street Address (P.O. Box Number is Not Acceptable) 125 N.W. 127TH STREET **MIAMI FL 33168** City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. Do change Studius, typed or printed name of registered agent and title il applicable (NOTE: Registered Agent signature required when reinstaling) N. 11 . 1 . 1 . 10 FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State > ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Addition TITLE ☐ Delete TITLE EVANS, JUDITH NAME NAME 125 N.W. 127TH STREET STREET ADDRESS STREET ADDRESS NORTH MIAMI FL 33168 CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition ☐ Delete TITLE TITLE SALVOG, DEAN NAME NAME 14525 N.W. 13TH AVE STREET ADDRESS STREET ADDRESS **MIAMI FL 33167** CITY-ST-ZIP CITY-S1-7P TITLE Assistant Change: —⊞ Addition Delete. REDSURER NAME(M) DELVA, HERVE Buetty Malheur NAME STREET ADDRESS STREET ADDRESS 20680 NE 4TH COURT, # 105 MIAMI FL 33179 CITY-ST-ZIP CITY-ST-7IP Minmi Shores Fl. ☐ Change ☐ Addition TITLE ☐ Delete TITLE ROMELLA, WILLIAMS NAME NAME 415 NW 136TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33168** CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10.0r Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

SIGNATURE: Leve to S. Evan - Judith S. Evons TREOSURER

☐ Delete

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-7IP

TITLE

NAME

FEB 28 2006 (305) 751-546

Change

☐ Addition

FILED