2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006
Secretary of State

DOCUMENT# N99000002972

Entity Name: OPEN DOOR APOSTOLIC CHURCH, INC.

Current Principal Place of Business:

6721 S. FEDERAL HWY.
FORT PIERCE, FL 34953

New Principal Place of Business:

Current Mailing Address:

2001 S. 30TH ST.
FORT PIERCE, FL 34947

New Mailing Address:

FEI Number: 65-0912503 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MEEHAN, CHRISTOPHER E REV.
2001 S. 30TH ST.
FORT PIERCE, FL 34947 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: D ( ) Delete
Name: MEEHAN, CHRISTOPHER E REV.
Address: 2001 S 30TH STREET
City-St-Zip: FORT PIERCE, FL 34947

Title: D ( ) Delete
Name: BYRD, STEVE
Address: 766 RAINBOW ST
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: D ( ) Delete
Name: WRIGHT, MICHAEL
Address: 1108 S.W. HUTCHINS STREET
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: D ( ) Delete
Name: LABORI, JERRY
Address: 3120-B MURA DR.
City-St-Zip: FORT PIERCE, FL 34981

Title: ST (X) Delete
Name: WRIGHT, CYNTHIA
Address: 1108 S.W. HUTCHINS STREET
City-St-Zip: PORT ST. LUCIE, FL 34953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition
Name: LABORI, JERRY
Address: 3217 SUNRISE BLVD
City-St-Zip: FT. PIERCE, FL 34982

Title: ST (X) Change ( ) Addition
Name: MEEHAN, GOLDIE S
Address: 2001 S. 30TH ST
City-St-Zip: FORT PIERCE, FL 34947

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: GOLDIE S. MEEHAN ST 04/17/2006

Electronic Signature of Signing Officer or Director — Date