

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # N99000003118

1. Entity Name
ASSEMBLIES OF YAHSHUA'S DISCIPLES, INC.



Principal Place of Business
**1834 NW 83RD STREET
MIAMI, FL 33147**

Mailing Address
**1834 NW 83RD STREET
MIAMI, FL 33147**



02092006 No Chg-NP CRZE037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1062052	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**GORDON, LINTON
1834 NW 83RD STREET
MIAMI, FL 33147**

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

**100000448000
03/08/06-80078-022 61.25**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEST, LEONARD 865 S. BALFRED DRIVE W. PALM BEACH, FL 33413
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GAINER, JANICE 1320 WESTCHESTER DRIVE W. W. PALM BEACH, FL 33417
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NORTON, PETER E 218 AMBERGATE LANE GREEN ACRES, FL 33415
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GORDON, GRITEL 1834 NW 83RD STREET MIAMI, FL 33147
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PLUMMER, ANGELO 916 CAROLINE AVE W PALM BEACH, FL 33413
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOOD, YONIQUE 2050 N CONGRESS AVE W PALM BEACH, FL 33401

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-08-06 305-835-9184
Date Daytime Phone #