## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # N99000004113**

FLORIDA SIXTH ECCLESIASTICAL JURISDICTION CHURCH OF GOD IN CHRIST, INCORPORATED, MELBOURNE, FLOR

**FILED** 

Jul 11, 2005 8:00 am Secretary of State

07-11-2005 90122 022 \*\*\*\*61.25

Principal Place of Business 2701 LEONARD WEAVER BLVD. MELBOURNE, FL 32901

Mailing Address

2701 LEONARD WEAVER BLVD. MELBOURNE, FL 32901

2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04262005 Cha-NP CR2E037 (10/03) 4. FEI Number 59-3724660 Applied For City & State City & State Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WEAVER, LEONARD T SR. Street Address (P.O. Box Number is Not Acceptable) 2701 LEONARD WEAVER BLVD. MELBOURNE, FL 32901 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Stgnature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing Make check pavable to Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution. Due by May 1, 2005 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Change Addition TITLE ☐ Delete TITLE WEAVER, LEONARD T SR. NAME NAME 503 SOUTH KENTUCKY AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP COCOA, FL 32922 **VS** ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME DAVIS, FREDDIE NAME 1242 LOGAN AVE, NW STREET ADDRESS STREET ADDRESS PALM BAY, FL 32907 CITY-ST-ZIP CITY-ST-ZIP ■ Addition TITLE ☐ Delete TITLE WEAVER, CLEO R NAME NAME STREET ADDRESS STREET ADDRESS 503 S. KENTUCKY AVENUE CITY-ST-ZIP CITY-ST-ZIP COCOA, FL 32922 ☐ Change ■ Addition ☐ Delete TITLE TITLE STALEY, SHEVIE NAME NAME 1000 MARIPOSA DRIVE NE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM BAY, FL 32905 CITY-ST-ZIP ☐ Change ☐ Addition D ☐ Defete TITLE TITLE WALKER, MULETHA L NAME NAME STREET ADDRESS 982 VANTAGE STREET SE STREET ADDRESS PALM BAY, FL 32909 CITY-ST-ZIP CITY-ST-71P ☐ Change ☐ Addition TITLE D ☐ Delete TITLE LEVARITY, FRED ELDER NAME STREET ADDRESS STREET ADDRESS 1215 GALATIN AVENUE CITY-ST-ZIP PALM BAY, FL 32907

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

CITY-ST-ZIP

Bishard L.T. Warvel, Se.