

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004360

FILED
May 26, 2008
Secretary of State

Entity Name: EVANGELISTIC FAMILY WORSHIP CENTER CHURCH OF GOD IN CHRIST, INC.

Current Principal Place of Business:

509 SOUTH DR. MARTIN LUTHER KING BLVD
DAYTONA BEACH, FL 32114

New Principal Place of Business:

1037 MASON AVE
DAYTONA BEACH, FL 32114

Current Mailing Address:

P.O. BOX 10552
DAYTONA BEACH, FL 32120 US

New Mailing Address:

FEI Number: 59-3322761 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BUTTS, ESTHER M
100 SHEILA AVE
DAYTONA BEACH, FL 32114 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: CD () Delete
Name: BUTTS, GEORGE E SR
Address: 15 PICKCANE LN
City-St-Zip: PALM COAST, FL 32164

Title: SD () Delete
Name: BUTTS, CATHY
Address: 15 PICKCANE LN
City-St-Zip: PALM COAST, FL 32164

Title: TD () Delete
Name: LONG, TURLINE
Address: 1148 EDITH DR
City-St-Zip: DAYTONA BEACH, FL 32217

Title: CLD () Delete
Name: THOMAS, JENNIFER
Address: 140 ZAHARIS CIR
City-St-Zip: DAYTONA BEACH, FL 32124

Title: PRD () Delete
Name: SMITH, PHYLLIS
Address: 66 CYPRESS POND RD.
City-St-Zip: PORT ORANGE, FL 32128

Title: JD () Delete
Name: BROOKS, TYRONE
Address: 433 N. PINE STREET
City-St-Zip: DAYTONA BEACH, FL 32124

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: LONG, JESTINE
Address: 1148 EDITH DR
City-St-Zip: DAYTONA BEACH, FL 32217

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 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: ESTHER M. BUTTS

RA

05/26/2008

Electronic Signature of Signing Officer or Director

Date