

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005050

FILED
Mar 07, 2005
Secretary of State

Entity Name: SPIRIT-FILLED INTERNATIONAL CHURCH, INC.

Current Principal Place of Business:

630 WEST OAK RIDGE RD.
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

630 WEST OAK RIDGE RD.
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 59-3656187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIERRE, DAVID A
5795 OLEANDER DRIVE
ORLANDO, FL 32807 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: T () Delete
Name: PIERRE, DAVID A
Address: 2909 SILVER RIDGE DR.
City-St-Zip: ORLANDO, FL 32818

Title: T () Delete
Name: PIERRE, MARIE R
Address: 2909 SILVER RIDGE DR.
City-St-Zip: ORLANDO, FL 32818

Title: T () Delete
Name: JEROME, MARIE B
Address: 3267 EL PRIMO WAY
City-St-Zip: ORLANDO, FL 32808

Title: T () Delete
Name: NOEL, DERLY J
Address: 3380 WILDERNESS TRAIL
City-St-Zip: KISSIMMEE, FL 34746

Title: T () Delete
Name: NOEL, WILCHELSON
Address: 3380 WILDERNESS TR.
City-St-Zip: KISSIMMEE, FL 34746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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 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: DERLY J. NOEL

TRES

03/07/2005

Electronic Signature of Signing Officer or Director

Date