

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005050

FILED  
Mar 30, 2007  
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  
3251 FAIRFIELD DRIVE  
KISSIMMEE, FL 34743 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: 3251 FAIRFIELD DRIVE  
City-St-Zip: KISSIMMEE, FL 34743

Title: T ( ) Delete  
Name: PIERRE, MARIE R  
Address: 3251 FAIRFIELD DRIVE  
City-St-Zip: KISSIMMEE, FL 34743

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 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: DERLY MARS

TREA

03/30/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date