

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 12, 2007 08:00 AM
Secretary of State

DOCUMENT # N99000005943

1. Entity Name

A. F. M. CHURCH OF GOD, INC.



Principal Place of Business

806 MUSCOGEE ROAD
CANTONMENT, FL 32533

Mailing Address

P O BOX 941
CANTONMENT, FL 32533



01072007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number

81-0624126

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BROWN, DONICE
806 MUSCOGEE ROAD
CANTONMENT, FL 32533

**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

Donice Brown Sr *Donice Brown Sr*

1-7-07

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME BROWN, DONICE
STREET ADDRESS 2265 WELCOME CIRCLE
CITY, ST, ZIP CANTONMENT, FL 32533

U00000584536
01/12/07-80041-007 8.75

TITLE VTD
NAME TOLBERT, T C
STREET ADDRESS 226 ELSTON AVENUE
CITY, ST, ZIP ANNISTON, AL 36201

U00000584536
01/12/07-80041-008 61.25

TITLE D
NAME TRUSS, JAMES
STREET ADDRESS P O BOX 86
CITY, ST, ZIP LINCOLN, AL 35096

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TITLE D
NAME CRUM, JOHN
STREET ADDRESS 4236 JACKSON STREET
CITY, ST, ZIP B'HAM, AL 35217

TITLE D
NAME TOLBERT, T C JR
STREET ADDRESS 768 GRAYTON RD
CITY, ST, ZIP OHATCHEE, AL 36271

TITLE D
NAME CUNNINGHAM, JOHNNY
STREET ADDRESS 7511 SELLARS ST
CITY, ST, ZIP CENTURY, FL 32535

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

Donice Brown Sr *Donice Brown Sr* 1-7-07 (850) 393-7811

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #