2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 01, 2009
Secretary of State

DOCUMENT# P15987

Entity Name: ASSEMBLY OF GOD EXPRESSION OF MARRIAGE ENCOUNTER, INC.

Current Principal Place of Business:

1353 E SUNSHINE
SPRINGFIELD, MO 65804

New Principal Place of Business:

Current Mailing Address:

1353 E SUNSHINE
SPRINGFIELD, MO 65804

New Mailing Address:

FEI Number: 43-1252652 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
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:

CARTER, WES
1707 E. BLOOMINGDALE
VALRICO, FL 33594 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: TD ( ) Delete
Name: MCDONALD, JOE, D
Address: 1353 E SUNSHINE
City-St-Zip: SPRINGFIELD, MO

Title: D ( ) Delete
Name: GROSS, TOM
Address: 3517 LABADIE DR
City-St-Zip: FORT WORTH, TX 76118

Title: D ( ) Delete
Name: MASSEY, BOBBY
Address: 23 HIGH POINT RD
City-St-Zip: VALLEY CENTER, KS 67147

Title: D ( ) Delete
Name: MORRISON, DAVE
Address: 6400 RISING SUN DR
City-St-Zip: GROVE CITY, OH 43123

Title: PD ( ) Delete
Name: MORRISON, DAVE
Address: 6400 RISING SUN CIR
City-St-Zip: GROVE CITY, OH 43123

Title: D ( ) Delete
Name: WOOD, RUSS
Address: 576 N. TROUT LAKE DR.
City-St-Zip: SANGER, CA 93657

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: PD (X) Change ( ) Addition
Name: PYPER, JOHN
Address: 3484 CHARRING CROSS DR
City-St-Zip: STOW, OH 44224

Title: D (X) Change ( ) Addition
Name: LORREN, HELWIG
Address: 248 ELDERBERRY CIRCLE
City-St-Zip: ATHANS, GA 30605

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: JOE D MCDONALD TREA 07/01/2009

Electronic Signature of Signing Officer or Director — Date