

**2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 819778

**FILED**  
**Mar 20, 2014**  
**Secretary of State**  
**CC1039531375**

**Entity Name:** THE GENERAL COUNCIL OF THE ASSEMBLIES OF GOD

**Current Principal Place of Business:**

1445 N. BOONVILLE AVENUE  
SPRINGFIELD, MO 65802-1894

**Current Mailing Address:**

1445 N. BOONVILLE AVENUE  
SPRINGFIELD, MO 65802-1894

**FEI Number:** 44-0577787

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

PENINSULAR FLORIDA DISTRICT COUNCILN  
1437 E. MEMORIAL BLVD.  
LAKELAND, FL 33801 US

*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

**Officer/Director Detail :**

Title PD  
Name WOOD, GEORGE O  
Address 1445 BOONVILLE AVENUE  
City-State-Zip: SPRINGFIELD MO 65802

Title TD  
Name CLAY, DOUGLAS E  
Address 1445 BOONVILLE AVENUE  
City-State-Zip: SPRINGFIELD MO 65802

Title SD  
Name BRADFORD, JAMES T  
Address 1445 BOONVILLE AVENUE  
City-State-Zip: SPRINGFIELD MO 65802

Title VD  
Name GARRISON, ALTON  
Address 1445 BOONVILLE AVENUE  
City-State-Zip: SPRINGFIELD MO 65802

Title D  
Name MUNDIS, GREGORY M  
Address 1445 BOONVILLE AVENUE  
City-State-Zip: SPRINGFIELD MO 65802

Title D  
Name SMITH, ZOLLIE LJR  
Address 1445 BOONVILLE AVENUE  
City-State-Zip: SPRINGFIELD MO 65802

*I hereby 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 all other like empowered.*

**SIGNATURE:** DOUGLAS E. CLAY

**GENERAL TREASURER**

**03/20/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date