

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737740

FILED
Feb 21, 2008
Secretary of State

Entity Name: OAK CITY ASSEMBLY OF GOD, INC.

Current Principal Place of Business:

3080 WEST TENNESSEE STREET
TALLAHASSEE, FL 32304

New Principal Place of Business:

Current Mailing Address:

3080 WEST TENNESSEE STREET
TALLAHASSEE, FL 32304

New Mailing Address:

FEI Number: 59-6547532 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL, ROBERT M REV
5628 LUNKER LANE
TALLAHASSEE, FL 32303 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: S () Delete
Name: GARNER, JOHN
Address: 4450 SHERBONE ROAD
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: GILBERT, BILL
Address: 4716 FLOWERWOOD DR
City-St-Zip: TALLAHASSEE, FL 32309

Title: P () Delete
Name: CAMPBELL, ROBERT M REV
Address: 5628 LUNKER LAND
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: OVERSTREET, TOM
Address: 517 MEADOWRIDGE DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: DAVIS, MORRIS
Address: 187 MOODY LANE
City-St-Zip: HAVANA, FL 32333

Title: D (X) Delete
Name: ALLBRITTON, DANIEL
Address: 1909 FANNIE DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: P (X) Change () Addition
Name: CAMPBELL, ROBERT M REV
Address: 5628 LUNKER LANE
City-St-Zip: TALLAHASSEE, FL 32303

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

Title: D (X) Change () Addition
Name: ALLBRITTON, DANIEL
Address: 1909 FANNIE DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

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: REV ROBERT MATTHEW CAMPBELL

P

02/21/2008

Electronic Signature of Signing Officer or Director

_____ Date