

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 29, 2005  
Secretary of State**

DOCUMENT# N00000006607

Entity Name: INTERDENOMINATIONAL CHURCH OF GOD, INC.

**Current Principal Place of Business:**

5911 E. SPRING ST  
SUITE 368  
LONG BEACH, CA 90808

**New Principal Place of Business:**

**Current Mailing Address:**

5911 E. SPRING ST  
SUITE 368  
LONG BEACH, CA 90808

**New Mailing Address:**

FEI Number: 59-3679906      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ISAAC, KENNETH  
301 NORTH GREENWOOD AVE.  
CLEARWATER, FL 33755 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: PD ( ) Delete  
Name: JONES, IRA DR.  
Address: 5911 E. SPRING ST., SUITE 368  
City-St-Zip: LONG BEACH, CA 90808

Title: CD ( ) Delete  
Name: DIXON, MAXINE  
Address: 13155 116 LANE NO.  
City-St-Zip: LARGO, FL 33778

Title: TD ( ) Delete  
Name: JENKINS, NAOMI  
Address: 1129 CARLETON ST.  
City-St-Zip: CLEARWATER, FL 34615

Title: SD ( ) Delete  
Name: ISAAC, JANICE  
Address: 301 N. GREENWOOD AVE.  
City-St-Zip: CLEARWATER, FL 34615

Title: AT ( ) Delete  
Name: LEE, JENNIFER  
Address: 1567 CROWN ST.  
City-St-Zip: CLEARWATER, FL 33754

**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 Section 119.07(3)(i), 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: IRA JONES PHD

PD

04/29/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date