

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741483

FILED
Apr 06, 2009
Secretary of State

Entity Name: THE HOLT ASSEMBLY OF GOD, INC.

Current Principal Place of Business:

540 THIRD AVE.
HOLT, FL 325640007

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7
HOLT, FL 325640007

New Mailing Address:

FEI Number: 59-2115734

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLT, BRENDA C
4861 L ADAMS RD
HOLT, FL 32564 US

Name and Address of New Registered Agent:

CARPENTER, CECIL G
4670 BERRY RD
HOLT, FL 32564 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: CECIL G. CARPENTER

04/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: STTR () Delete
Name: HOLT, BRENDA
Address: 4861 ADAMS ROAD
City-St-Zip: HOLT, FL

Title: CD () Delete
Name: JOHNS, LEON
Address: 483 4TH AVE
City-St-Zip: HOLT, FL 32564

Title: P () Delete
Name: CARPENTER, GUS C
Address: 3RD AVENUE
City-St-Zip: HOLT, FL 32564

Title: C () Delete
Name: CHESTNUT, MICHAEL
Address: 213 GOLF COURSE DR
City-St-Zip: CRESTVIEW, FL 32536

Title: VD () Delete
Name: HOLT, JAMES C
Address: 4861 L ADAMS RD
City-St-Zip: HOLT, FL 32564

Title: D () Delete
Name: BOOTH, JAMES
Address: 477 MARTEN LANE
City-St-Zip: HOLT, FL 32564

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STTR (X) Change () Addition
Name: DEES, RHONDA
Address: 487 MARTEN RD
City-St-Zip: HOLT, FL 32564

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 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: CECIL G. CARPENTER

P

04/06/2009

Electronic Signature of Signing Officer or Director

Date