

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003774

FILED
Jan 07, 2011
Secretary of State

Entity Name: MY FATHER'S HOUSE, AN ECA CHURCH, INC.

Current Principal Place of Business:

8785 ERIE LANE
PARRISH, FL 34219

New Principal Place of Business:

Current Mailing Address:

8785 ERIE LANE
PARRISH, FL 34219

New Mailing Address:

FEI Number: 47-0940034

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARBER, ANNE E REV
8785 ERIE LANE
PARRISH, FL 34219 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: T
Name: CARLTON, JUDITH
Address: 9208 34TH AVE.,E.
City-St-Zip: PALMETTO, FL 34221

Title: TR
Name: BELLUNE, BATHENEL
Address: 4424 85TH AVE CIR E
City-St-Zip: PARRISH, FL 34219

Title: P
Name: BARBER, ROBERT E REV.
Address: 8785 ERIE LANE
City-St-Zip: PARRISH, FL 34219

Title: TR
Name: SIMEON, FRINOT
Address: 6107 61ST ST E.
City-St-Zip: PALMETTO, FL 34221

Title: S
Name: KING, VICTORY
Address: 3374 MORCHESTER LANE
City-St-Zip: NORTH PORT, FL 34286

Title: TR
Name: WHITE, STEVE
Address: 5971 JIM DAVIS RD
City-St-Zip: PARRISH, FL 34219

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: REV ROBERT E. BARBER

P

01/07/2011

Electronic Signature of Signing Officer or Director

Date