

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 03, 2006
Secretary of State**

DOCUMENT# N05000012599

Entity Name: TEMPLE OF LIGHT FELLOWSHIP MINISTRIES, INC.

Current Principal Place of Business:

6802 COMMONWEALTH AVENUE
JACKSONVILLE, FL 32254

New Principal Place of Business:

Current Mailing Address:

8959 SPRING HARVEST LANE WEST
JACKSONVILLE, FL 32244

New Mailing Address:

FEI Number: 20-3840434 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

NELSON, RONALD B
11091 COPPERHILL ROAD
JACKSONVILLE, FL 32218 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: D () Delete
Name: MOORE, HERBERT
Address: 8959 SPRING HARVEST LANE WEST
City-St-Zip: JACKSONVILLE, FL 32244

Title: D () Delete
Name: MOORE, BETTY
Address: 8959 SPRING HARVEST LANE WEST
City-St-Zip: JACKSONVILLE, FL 32244

Title: D () Delete
Name: WILLIAMS, SHANA
Address: 2617 HUBBARD STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: D () Delete
Name: GARTRELL, RIKKA
Address: 11349 BLOSSOM RIDGE DRIVE
City-St-Zip: JACKSONVILLE, FL 32218

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: HERBERT MOORE

D

07/03/2006

Electronic Signature of Signing Officer or Director

_____ Date