2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23096

Entity Name: CHURCH OF THE HOLY SPIRIT

FILED Jul 16, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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601 PHILIPPE PARKWAY SAFETY HARBOR, FL 346953148 US

Current Mailing Address: New Mailing Address:

601 PHILIPPE PARKWAY SAFETY HARBOR, FL 346953148

FEI Number: 59-2685231 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

THOMPSON & FOOTE, P.A. 1130 CLEVELAND ST., STE. 270 CLEARWATER, FL 34615 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: M () Delete Title: M (X) Change () Addition
Name: HARPER, HELENE DR. Name: KNAPIK, DONALD MR
Address: 510 SHORE DR E Address: 2442 ANTHONY AVENUE

 City-St-Zip:
 OLDSMAR, FL 34677
 City-St-Zip:
 CLEARWATER, FL 33759

 Title:
 D () Delete
 Title:
 D (X) Change () Addition

Name: LEHLBACH, BONNIE Name: BROWN, CHARLES MR.
Address: 306 HAMILTON AVENUE Address: 1111 N. BAYSHORE BLVD. APT F 8

City-St-Zip: SAFETY HARBOR, FL 346953213 City-St-Zip: CLEARWATER, FL 33759

Title: SD () Delete Title: SD (X) Change () Addition Name: PERRY, STEPHANIE Name: SKIBICKI, VICTOR MR.

 Name:
 PERRY, STEPHANIE
 Name:
 SKIBICKI, VICTOR MR.

 Address:
 #B, 2889 E BANCROFT CIRCLE
 Address:
 2625 BURNTFORK DR.

 City-St-Zip:
 PALM HARBOR, FL 34683
 City-St-Zip:
 CLEARWATER, FL 33761

Title: TD () Delete Title: TD (X) Change () Addition KNAPIK, DONALD F Name: Name: BOWERS, AUDREY MRS. 3314 ENTERPRISE ROAD, EAST Address: 2442 ANTONY AVE Address: City-St-Zip: CLEARWATER, FL 33759 City-St-Zip: SAFETY HARBOR, FL 34695

Title: C () Delete Title: () Change () Addition

 Name:
 BONAN, RAYNALD S. REV.
 Name:

 Address:
 18612 CHEMILLE DR
 Address:

 City-St-Zip:
 LUTZ, FL 33549
 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: DONALD F. KNAPIK M 07/16/2004