

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 29, 2006 8:00 am**  
**Secretary of State**

03-29-2006 90113 029 \*\*\*\*61.25

**DOCUMENT # 703258**

1. Entity Name  
**TRUE GOSPEL HOLINESS CHURCH OF THE LIVING  
GOD, INC.**



Principal Place of Business  
**360 SW 29TH AVE  
FT LAUDERDALE, FL 33312 US**

Mailing Address  
**315 NE 35TH CT  
FT LAUDERDALE, FL 33334 US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02232006 Chg-NP CR2E037 (11/05)

4. FEI Number  
**59-1840605**

☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**MARTIN, REATHER  
315 N.E. 35TH COURT  
FT. LAUDERDALE, FL 33334**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee Is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME GERMAN, C.J.  
STREET ADDRESS 360 SW 29TH AVE  
CITY-ST-ZIP FT. LAUDERDALE, FL

TITLE SD ☐ Delete  
NAME MARTIN, REATHER  
STREET ADDRESS 315 N.E. 35TH COURT  
CITY-ST-ZIP FT. LAUDERDALE, FL

TITLE D ☐ Delete  
NAME GERMON, ERNESTINE  
STREET ADDRESS 360 SW 29TH AVE  
CITY-ST-ZIP FT LAUDERDALE, FL

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Reather Martin*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3-28-2006-9543647845**

Date

Daytime Phone #

ATTACHMENT  
40040996**Annual Report Form Creation**

**Note: Please make ALL checks payable to the Florida Department of State**

**NOTICE TO NOT FOR PROFIT CORPORATIONS SOLICITING CONTRIBUTIONS**

The Department of Agriculture and Consumer Services, Division of Consumer Services, is now responsible for administering the Solicitation of Contributions Act, chapter 496, Florida Statutes. The Solicitation of Contributions Act requires charitable organizations or sponsors intending to solicit contributions from the public in the State of Florida to annually register with the Division of Consumer Services. Failure to comply with this act is a third degree felony.

For more information, contact the Division of Consumer Services, Department of Agriculture and Consumer Services, Room 208A Mayo Building, Tallahassee, Florida 32399-0800 or call (850) 488-2221 or (800) 435-7352-(within Florida only).

Enter the entity document number below to create your pre-printed Annual Report form.

**Document Number** 703258

Note: On 12 digit document numbers,  
only the first character is alphabetic.

The document number is located on the back  
of the postcard above the business entity name

Can't find your document number? [Search](#) the Division's records on-line by name.

[Sunbiz Home Page](#)[Help](#)