

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708774

FILED
Feb 12, 2004
Secretary of State

Entity Name: THE FIRST HOLINESS CHURCH OF THE LIVING GOD, INCORPORATED

Current Principal Place of Business:

PO BOX 309
SOUTH BAY, FL 334930309

New Principal Place of Business:

Current Mailing Address:

PO BOX 309
SOUTH BAY, FL 334930309

New Mailing Address:

FEI Number: 05-0063511 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WRISPER, WILLIE (BISHOP)
250 12TH AVE SOUTHWEST
SOUTH BAY, FL 33493 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: DT () Delete
Name: WRISPER, JIMMIE L
Address: 1149 SW AVE I
City-St-Zip: BELL GLADE, FL 33430

Title: DT () Delete
Name: KYLES, LATHAN
Address: 425 EILON AVE
City-St-Zip: SOUTH BAY, FL 33493

Title: D () Delete
Name: WRISPER, ELOUISE
Address: 1149 SW AVE I
City-St-Zip: BELLE GLADE, FL 33430

Title: ET () Delete
Name: EDWARDS, VERSIE LEE
Address: 290 SW 10TH AVE
City-St-Zip: SOUTH BAY, FL 33493

Title: B () Delete
Name: WRISPER, WILLIE
Address: 250 12TH AVE
City-St-Zip: SOUTH BAY, FL 33493

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: BH (X) Change () Addition
Name: WRISPER, JIMMIE L
Address: 1149 SW AVE I
City-St-Zip: BELL GLADE, FL 33430

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 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: WILLIE WRISPER

BH

02/12/2004

Electronic Signature of Signing Officer or Director

_____ Date