


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2006 08:00 AM
Secretary of State

DOCUMENT # 710547	
1. Entity Name THE TRUE HOLINESS PENTECOSTAL OF LORD JESUS CHURCH OF THE OPEN DOOR, INC.	

Principal Place of Business 5099 LITTLE ROCK CIR. C/O JOHN ANDREWS EBRO, FL 32437 US	Mailing Address 4655 VERBENA ROAD C/O JOHN ANDREWS EBRO, FL 32437 US
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02012006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1762839	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ANDREWS, JOHN 4655 VERBENA ROAD EBRO, FL 34237
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**DO NOT WRITE
IN THIS SPACE**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, MARY L 3961 LORENZA PLACE VERNON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ANDREWS, JOHN 4655 VERBENA ROAD EBRO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, RUDOLPH 4727 HAPPY HILL ROAD EBRO, FL 32427
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANDREWS, BERNICE 4655 VERBENA ROAD EBRO, FL 32427
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BROWN, LOUIS D 3961 LORENZA PL VERNON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

11.00004445 2.
02/27/06 00009-000 70.00

**DO NOT WRITE
IN THIS SPACE**

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: John Andrews John Andrews 2-20-06 850-535-0511
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #