2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 11, 2005 8:00 am
Secretary of State
02-11-2005 90122 001 ****61.25
02-11-2005 90122 002 *****8.75

DOCUMENT # 722345

1. Entity Name

THE HOLY GHOST CHURCH OF GOD PURCHASED WITH HIS BLOOD INC.

1st MOORE CR2E037 (10/04)

Principal Place of Business	Mailing Address
2901 5TH AVENUE SOUTH ST PETERSBURG FL 33712 US	782 64TH AVE. SOUTH ST. PETERSBURG FL 33705-5922 US

2. Principal Place of Business	3. Mailing Address
2901 5th ave.south	782 64th ave.south
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: St. Petersburg,FL.	City & State: ST.Petersburg,FL
Zip: 33712 Country: U.S.A.	Zip: 33705 Country: U.S.A.

4. FEI Number: 23-7168635 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HOLCY, WILLIE D BISHOP
782 64TH AVE SOUTH
ST. PETERSBURG FL 33705

7. Name and Address of New Registered Agent

Name: BISHOP WILLIE D. HOLCY
Street Address (P.O. Box Number is Not Acceptable): 782 64th ave.SOUTH
City: ST. PETERSBURG, FL Zip Code: 33705

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: BISHOP WILLIE D. HOLCY 2/8/2005
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25 Due By May 1, 2005

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PMD HOLCY, WILLIE D.(BISHOP) 782 64 AVE S ST. PETE. FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VTD HOLCY, ARIE LEE 782 64 AVE S ST. PETE. FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M RIVERS, PATRICIA ANN 2440 24TH AVE S ST. PETE. FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ANDREW, ISAAC 6911 BONAIR DR TAMPA FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DANIELS, WILLIAM H. 2501 22 AVE S ST PETE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: BISHOP WILLIE D.HOLCY CHARMAN OF BOARD 2/8/2005/PH. 727-864-0046