

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722345

FILED
Feb 11, 2009
Secretary of State

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

Current Principal Place of Business:

2901 5TH AVENUE SOUTH
ST PETERSBURG, FL 33712 US

New Principal Place of Business:

Current Mailing Address:

782 64TH AVE. SOUTH
ST. PETERSBURG, FL 337055922 US

New Mailing Address:

FEI Number: 23-7168635

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

HOLCY, ARIE L PMD
782 64TH AVE SOUTH
ST. PETERSBURG, FL 33705 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: ARIE LEE HOLCY

02/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: HOLCY, ARIE LEE
Address: 782 64 AVE S
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: SD () Delete
Name: RIVERS, PATRICIA ANN,
Address: 2440 24TH AVE S
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: D () Delete
Name: ANDREW, ISAAC
Address: 6911 BONAIR DR
City-St-Zip: TAMPA, FL

Title: TD () Delete
Name: DANIELS, WILLIAM H.,
Address: 2501 22ND AVE S
City-St-Zip: SAINT PETERSBURG, FL 33712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CD (X) Change () Addition
Name: JACKSON, PATRICIA AN, N
Address: 1420 27TH AVE. SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: WRIGHT, SHALEISHA,
Address: 2240 24TH AVE. SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33712

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ARIE LEE HOLCY

PMD

02/11/2009

Electronic Signature of Signing Officer or Director

Date