2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2009
Secretary of State

DOCUMENT# 722621

Entity Name: HOUSE OF GOD THE PENTECOSTAL CHURCH OF THE LIVING GOD THE GATES OF HEAVEN, INC.

Current Principal Place of Business:

830 SW 4TH ST
HOMESTEAD, FL 33030

New Principal Place of Business:

Current Mailing Address:

10730 S.W. 218 ST.
GOULDS, FL 33170 US

New Mailing Address:

FEI Number: 59-2591056 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORTIMER, MOTHER DAISY
10730 SW 218 ST.
GOULDS, FL 33170 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:	PB	( ) Delete
Name:	WILLIAMS, BISHOP CHA, RLES	
Address:	10720 SW 218 ST.	
City-St-Zip:	GOULDS, FL	
Title:	SRE	( ) Delete
Name:	MORTIMER, DAISY,	
Address:	10730 S.W. 218 ST.	
City-St-Zip:	GOULDS, FL	
Title:	CD	( ) Delete
Name:	CALDWELL, LONNIE C.	
Address:	995 NW 9 AVE.	
City-St-Zip:	FLORIDA CITY, FL	
Title:	SMD	( ) Delete
Name:	CALDWELL, CHARLIE,	
Address:	995 NW 9 AVE	
City-St-Zip:	FLORIDA CITY, FL	
Title:	GMD	( ) Delete
Name:	WILLIAMS, ANNIE S.,	
Address:	10720 S.W. 218 ST.	
City-St-Zip:	GOULDS, FL	
Title:	T	( ) Delete
Name:	MAYO, JOE,	
Address:	13510 SW 226 ST	
City-St-Zip:	NARANJA, FL	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:	
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 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: BISHOP CHARLIE WILLIAMS PB 01/11/2009

Electronic Signature of Signing Officer or Director — Date