2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 04, 2004 8:00 am DOCUMENT # 724375 **Secretary of State** 1. Entity Name 02-04-2004 90122 001 ****61.25 THE HOUSE OF GOD OF DUNEDIN, INC. 02-04-2004 90122 002 *****8.75 Principal Place of Business Mailing Address 443 JACKSON ST 443 JACKSON ST 66400868 DUNEDIN FL 34698 **DUNEDIN FL 34698** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State Applied For 4. FEI Number 23-7247864 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MOORE A. L. MOORE, A L 422 JACKSON ST Street Address (P.O. Box Number is Not Acceptable) **DUNEDIN FL 34698** 422 Jackson Street DUNEDIN Zip Code 134698 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. rant. N. L. Morke Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. TITLE ☐ Delete Change Addition TITLE BROWN, JUANITA NAME JEARWATER, FI, 3 439 JACKSON ST STREET ADDRESS STREET ADDRESS **DUNEDIN FL 34698** CITY-ST-ZIP CITY-ST-ZIP OD ☐ Delete Change Addition DIXON, JR., J. FREDERICK 1530 CARMEL AVENUE STREET ADDRESS STREET ADDRESS CLEARWATER FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition MOORE, A. L. -NAME NAME 422 JACKSON ST. STREET ADDRESS STREET ADDRESS DUNEDIN FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS City, ST, ZIP CITY-ST-7IP 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.

FILED

SIGNATURE: Lewant-A. P. Moodle - Servant. A.L. Moore JAN. 29,2804. 27-733-4767