2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733489

FILED Jun 01, 2009 Secretary of State

Entity Name: HOLY TEMPLE OF GOD, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: LANDMARK HOLY TEMPLE OF GOD 1220 N.E. 23RD AVENUE GAINESVILLE, FL 32609 **New Mailing Address: Current Mailing Address:** P. O. BOX 975 GAINESVILLE, FL 32602 FEI Number: 59-2786486 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HUTCHINSON, HARVEY J 3869 SE 9TH LANE MELROSE, FL 32666 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete HUTCHINSON, HARVEY J JR Name: Name: 3869 SE 9TH LANE Address: Address: City-St-Zip: MELROSE, FL 32666 City-St-Zip: Title: Title: () Delete () Change () Addition LEWIS-HUTCHINSON, GLORIA Name: Name: Address: 3869 SE 9 LANE Address: City-St-Zip: MELROSE, FL 32666 City-St-Zip: Title: VD. () Delete Title: () Change () Addition BRYANT, MAMIE Name: Name: 113 BIG APPLE ROAD Address: Address: City-St-Zip: EAST PALATKA, FL 32131 City-St-Zip: Title: RS () Delete Title: () Change () Addition Name: CAMPS, WILMA R Name: **3015 NE 13TH DRIVE** Address: Address: City-St-Zip: GAINESVILLE, FL 32609 City-St-Zip: Title: () Delete Title: () Change () Addition HARRIS, WILLIE Name: Name: 3226 NW 62ND AVENUE Address: Address: City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: Title: () Delete Title: () Change () Addition MCCULLOUGH, CARL Name: Name: Address: 687 ST.ANDREWS CIRCLE Address: RANTOUL, IL 61866 City-St-Zip: 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: HARVEY JAMES HUTCHINSON, JR PD 06/01/2009