2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2006
Secretary of State

DOCUMENT# 737056

Entity Name: HOUSE OF GOD SAINTS IN CHRIST, INC.

Current Principal Place of Business:

1005 ODESSA STREET
JACKSONVILLE, FL 32206

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 9962
JACKSONVILLE, FL 32208

New Mailing Address:

FEI Number: 58-1287672 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOORE, LORENZO BISHOP
5663 INTERNATIONAL DRIVE
JACKSONVILLE, FL 32219 US

Name and Address of New Registered Agent:

MOORE, LORENZO BISHOP
6331 DUNN AVENUE
JACKSONVILLE, FL 32218 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: LORENZO MOORE 02/08/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MOORE, LORENZO BISHOP
Address: 6331 DUNN AVENUE
City-St-Zip: JACKSONVILLE, FL 32218

Title: DT ( ) Delete
Name: GELSEY, JAMES BISHOP
Address: RT. 3, BOX 4435
City-St-Zip: FOLKSTON, GA 31537

Title: DS ( ) Delete
Name: FORD, GUS C BIS.
Address: 2283 SARATOGA DRIVE
City-St-Zip: DECATUR, GA 30032

Title: D ( ) Delete
Name: LITMAN, ALTON BISHOP
Address: 605 SUGAR STREET
City-St-Zip: TIFTON, GA 31794

Title: D ( ) Delete
Name: MOORE, LORENZO,
Address: 6331 DUNN AVENUE
City-St-Zip: JACKSONVILLE, FL 32218

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DT (X) Change ( ) Addition
Name: GELSEY, JAMES BISHOP
Address: 155 DIXIE LAKE ROAD
City-St-Zip: FOLKSTON, GA 31537

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 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: LORENZO MOORE PD 02/08/2006
Electronic Signature of Signing Officer or Director Date