

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741826

FILED  
May 04, 2005  
Secretary of State

Entity Name: OUR FATHER'S HOUSE, INC.

**Current Principal Place of Business:**

3100 N 75TH AVENUE  
HOLLYWOOD, FL 33024 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 848476  
PEMBROKE PINES, FL 33024 US

**New Mailing Address:**

FEI Number: 59-1843075      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:**

CONWAY, DAVID G  
320 N W 91ST AVENUE  
PEMBROKE PINES, FL 33024 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: PDM ( ) Delete  
Name: CONWAY, DAVID G  
Address: 320 NW 91ST AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: VD ( ) Delete  
Name: MERCIER, RICHARD E  
Address: 17644 SW 6TH ST  
City-St-Zip: PEMBROKES PINES, FL 33029

Title: T ( ) Delete  
Name: MCDERMOTT, MICHEAL F  
Address: 3260 W QUAYSIDE DR  
City-St-Zip: COOPER CITY, FL 33026

Title: S ( ) Delete  
Name: RUGGLES, RICHARD G  
Address: 13323 SW 28 ST  
City-St-Zip: DAVIE, FL 33330

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAVID G. CONWAY

Electronic Signature of Signing Officer or Director

PDM

05/04/2005

Date