

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 02, 2005 8:00 am
Secretary of State

08-02-2005 90033 050 ****75.00



DOCUMENT # 759537
 1. Entity Name
CHURCH OF GOD, SOURCE OF VICTORY, AND HOUSE OF PRAYER, INC.

Principal Place of Business: 45 N.E. 54TH STREET MIAMI FL 33137
 Mailing Address: 45 N.E. 54TH STREET MIAMI FL 33137

2. Principal Place of Business: Suite, Apt. #, etc.
 3. Mailing Address: Suite, Apt. #, etc.

City & State: _____
 City & State: _____

Zip: _____ Country: _____ Zip: _____ Country: _____



2nd MOORE CR2E037 (5/05)

4. FEI Number: **90-0083902** Applied For: Not Applicable:

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
RE'JOUIS, WILNER REV
10659 NE 11TH AVE.
MIAMI SHORES FL 33138

7. Name and Address of New Registered Agent
 Name: _____
 Street Address (P.O. Box Number is Not Acceptable): _____
 City: _____ FL Zip Code: _____

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.

SIGNATURE: _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25 Due By September 7, 2005

9. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

Make Check Payable to Florida Department of State

10. PD OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME	RE'JOUIS, WILNER REV PASTOR 10659 NE 11TH AVE. MIAMI SHORES FL 33138 V	<input type="checkbox"/> Delete	TITLE NAME 2100 Sans Souci Boulevard North Miami FL 33183 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	RE'JOUIS, MARIE C F 10659 NE 11TH AVE. MIAMI SHORES FL 33138 TD	<input type="checkbox"/> Delete	TITLE NAME 2100 Sans Souci Boulevard North Miami FL 33183 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	ST GEORGES, NELSON B SR 150 NE 70TH ST. MIAMI FL 33138 ATD	<input type="checkbox"/> Delete	TITLE NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	ST GEORGES, BERNADETTE 150 NE 70TH ST MIAMI FL 33138 SD	<input type="checkbox"/> Delete	TITLE NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	MIL'HOMME, LAURIUS 13424 ASWAN ROAD, APT 115 OPALOCKA FL 33054 T	<input type="checkbox"/> Delete	TITLE NAME Wilson Garson 13710 NW 3rd Ave Miami FL 33138 <input type="checkbox"/> Change <input type="checkbox"/> Addition Secretary
TITLE NAME	GEORGES, WILLY J 9170 NE 8 AVE MIAMI FL 33138	<input type="checkbox"/> Delete	TITLE NAME Marie Pompe 1800 NW 135 St Miami FL 33138 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: Rev. Wilner Rejois 07-27-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR