

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760147

FILED
Mar 11, 2008
Secretary of State

Entity Name: TRUE HOLINESS CHURCH OF THE LIVING GOD, INC.

Current Principal Place of Business:

326 E. CHARLOTTE AVE.
PUNTA GORDA, FL 33950

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1723
326 E. CHARLOTTE AVE.
PUNTA GORDA, FL 33950

New Mailing Address:

FEI Number: 65-0199490 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BLANDING, BEVERLY
311 CAPRI ISLES CT.
PUNTA GORDA, FL 33950 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: PD () Delete
Name: BLANDING, ALTO,
Address: 311 CAPRI ISLES CT
City-St-Zip: PUNTA GORDA, FL 33950

Title: VD () Delete
Name: BLANDING, BEVERLY,
Address: 311 CAPRI ISLE CT
City-St-Zip: PUNTA GORDA, FL 33950

Title: SD () Delete
Name: OLIVER, ERLNEEE,
Address: 527 CRANDALL ST NW
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: T () Delete
Name: HICKS, JULIA,
Address: 433 ABURTO LANE
City-St-Zip: PORT CHARLOTTE, FL 0,

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 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: BEVERLY BLANDING

VP

03/11/2008

Electronic Signature of Signing Officer or Director

Date