2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 26, 2008 8:00 am **DOCUMENT # 762680** Secretary of State 1. Entity Name 02-26-2008 90024 001 ****61.25 HOLINESS HOUSE OF WORSHIP, INC. 02-26-2008 90024 002 *****8.75 Principal Place of Business Mailing Address C/O WILLIE B. JOHNSON 740 N.W. 17TH CT. 2320 NW 2ND ST. POMPANO BCH FL 33069 POMPANO BCH FL 33060 2. Principal Place of Business - No P.O. Box # Mailing Address % WILLIE B Johnson Holiness House of worship Snite, Apt. #. etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) 2320 740 nw City & State City & State Applied For 4. FEI Number BEACH DOMPAND 59-2206043 DOMBAND Not Applicable \$8.75 Additional 5. Certificate of Status Desired Broward Broward Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JOHNSON, WILLIE B Street Address (P.O. Box Number is Not Acceptable) 740 N.W. 17TH COURT POMPANO BEACH FL 33060 , **\ Zip Code 8. The above named entity sufpriits 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 prifted name of registered agent and title I applicable. (NOTE: Begistered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2008 Trust Fund Contribution. Added to Fees Florida Department of State OFFIC hindel Facility 1. Play 1984 by OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PD 356 3.65 kg TITLE TITLE Change ☐ Addition ☐ Delete JOHNSON, ROBERT NAME NAME 740 NW 17TH COURT STREET ADDRESS. STREET ADDRESS POMPANO BEACH FL 33060 CITY-ST-ZIP CITY-ST-ZIP VPD ☐ Delote ☐ Change ☐ Addition TITLE HOLMES, KENNETH NAME NAME 2920 NW 6TH COURT STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 33311 CITY-ST-7IP CITY-ST-7/P Delete Change ☐ Addition TITLE TITLE JOHNSON, WILLIE B NAME NAME 740 NW 17TH COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP POMPANO BEACH FL 33606 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change THILE TITLE ncitibbA 🔲 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COY-ST-7/P THILE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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SIGNATURE: WILLIE & Johnson Will & Johnson Section . 934 971 7083

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. 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 13 if changed, or on an attachment with an address, with all other like empowered.