2004 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Feb 10, 2004 8:00 am
Secretary of State
02-10-2004 90020 007 ****61.25

DOCUMENT # 765231

1. Entity Name
THE FIRST HOLINESS CHURCH OF JESUS OF THE APOSTOLIC FAITH INC.

Principal Place of Business	Mailing Address
23021 AVENUE D ALVA, FL 33920	1664 MOHAWK AVENUE % ELDER JOHNNIE JENKINS FORT MYERS, FL 33916

02022004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
23021 AVE. D	23181 SE AVE. C
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ALVA, FL	City & State: ALVA, FL
Zip: 33920 Country: Lee	Zip: 33920 Country: Lee

4. FEI Number 65-0030399 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
JENKINS, JOHNNIE (ELDER) 23181 SE AVENUE ALVA, FL 33920	Name: SAME 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

Amended AR is $61.25

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	EOD JENKINS, JOHNNIE 23181 SE AVENUE "C" ALVA, FL 33920	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	EOD Jenkins, Johnnie 23181 SE Ave. C Alva, FL 33920	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BD LAWARETHA D.T. JENKINS 23181 SE AVENUE ALVA, FL 33920	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	GMD Roundtree, Nettie, P. 23221 SE Ave. C Alva, FL 33920	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DAVIS, LEWIS 23021 AVE D ALVA, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Davis, Lewis 23021 Ave. D Alva, FL 33920	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	GS SHARP, LEROY 3441 CANAL STREET FORT MYERS, FL 33916	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	GS Roundtree, Nettie P. 23021 Ave C Alva, FL 33920	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DM DAVIS, GEORGIA M. 23201 SE AVENUE C ALVA, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DM Davis, Georgia 23201 SE Ave. C Alva, FL 33920	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BD SMITH, RUEBEN M. 1621 SEABOARD STREET FORT MYERS, FL 33916	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	YD Jenkins, Sarah 23181 SE Ave C Alva, FL 33920	☐ Change ☐ 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: Nettie Roundtree, General Sec. 2/2/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #