

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768945

FILED
Jan 06, 2011
Secretary of State

Entity Name: THE HOUSE OF MEDITATION IN GOD, INC.

Current Principal Place of Business:

C/O EVANS BROWN
627 CARVER DRIVE
LAKE WALES, FL 33853

New Principal Place of Business:

Current Mailing Address:

C/O EVANS BROWN
627 CARVER DRIVE
LAKE WALES, FL 33853

New Mailing Address:

FEI Number: 43-2042033

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, EVANS
338
LAKE WALES, FL 33853 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: D
Name: BROWN, VICTOR LEON SR.
Address: 1846 OAKLAND PARK DR
City-St-Zip: LAKE WALES, FL 33853

Title: D
Name: BROWN, VERA ANN
Address: 627 CARVER DRIVE
City-St-Zip: LAKE WALES, FL 33853

Title: T
Name: BROWN, EVA
Address: 627 CARVER DRIVE
City-St-Zip: LAKE WALES, FL 33853

Title: VP
Name: BROWN, CYNTHIA
Address: POST OFFICE BOX 472
City-St-Zip: DREXEL HILL, PA 19026

Title: B
Name: BROWN, EVANS
Address: 338
City-St-Zip: LAKE WALES, FL 33853

Title: D
Name: NUGENT, VELZINA L
Address: 243 GRAND RESERVE DR.
City-St-Zip: DAVENPORT, FL 33837

I hereby 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 all other like empowered.

SIGNATURE: PASTOR EVANS BROWN

B

01/06/2011

Electronic Signature of Signing Officer or Director

Date