2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 20, 2006
Secretary of State

DOCUMENT# 769276

Entity Name: THE HOLY CHURCH OF THE LIVING GOD,INC.

Current Principal Place of Business:

CHURCH
1598 WEST 14TH ST
JACKSONVILLE, FL 322094869 US

New Principal Place of Business:

Current Mailing Address:

1598 WEST 14TH STREET
JACKSONVILLE, FL 322094869

New Mailing Address:

FEI Number: 59-2892783 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

STEPHENS, SHARON B SISTER
416 SMITH ST
JACKSONVILLE, FL 32204 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: P ( ) Delete
Name: BAKER, MOSES M BISHOP
Address: 4828 EVANSTON ROAD
City-St-Zip: JACKSONVILLE, FL 32208

Title: V ( ) Delete
Name: HINTON, HERMAN C BISH
Address: 5509 MASTER STREET
City-St-Zip: PHILADELPHIA, PA 19131

Title: T ( ) Delete
Name: SWIFT, DORA EVANGELI, ST
Address: 1011 POWHATTAN STREET
City-St-Zip: JACKSONVILLE, FL 32209

Title: D ( ) Delete
Name: WILLIAMS, THEODORE ELDER
Address: 4800 RUSSELL STREET
City-St-Zip: RICHMOND, VA 23223

Title: D ( ) Delete
Name: HOBBS, HARMON
Address: 4035 PARRISH STREET
City-St-Zip: PHILADELPHIA, PA 19104

Title: D ( ) Delete
Name: HINTON, KIRK
Address: 512 NORTH 32ND ST.
City-St-Zip: PHILADELPHIA, PA 19104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: HINTON, HERMAN C BISHOP
Address: 5509 MASTER STREET
City-St-Zip: PHILDELPHIA, PA 19131

Title: V (X) Change ( ) Addition
Name: HINTON, KIRK ELDER
Address: 412 NORTH 32ND STREET
City-St-Zip: PHILADELPHIA, PA 19104

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: D (X) Change ( ) Addition
Name: STEPHENS, SHARON B MISS.
Address: 416 SMITH STREET
City-St-Zip: JACKSONVILLE, FL 32204

I hereby certify that the information supplied with this filing does not qualify for the 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: SHARON B. STEPHENS D 05/20/2006

Electronic Signature of Signing Officer or Director — Date