2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770745

FILED Mar 25, 2007 Secretary of State

Entity Name: TRUE HOLINESS UNITED PENTECOSTAL CHURCH OF JESUS, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 2471 SOUTH BLOSSOM TRAIL ORLANDO, FL 32805 **Current Mailing Address: New Mailing Address:** P.O. BOX 550028 ORLANDO, FL 328550028 FEI Number: 59-3077987 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VINSON, HURGENE 4933 LESCOTT LANE US ORLANDO, FL 32811 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition VINSON, HURGENE Name: Name: 4933 LESCOTT LANE Address: Address: City-St-Zip: ORLANDO, FL 32811 City-St-Zip: Title: DD Title: () Delete () Change () Addition Name: ROSS, JOHN Name: Address: 2769 SANTANNA AVE Address: City-St-Zip: ORLANDO, FL 32811 City-St-Zip: Title: () Delete Title: () Change () Addition JACK, SHIRLEY A Name: Name: 4298 WATCH HILL RD Address: Address: City-St-Zip: ORLANDO, FL 32808 City-St-Zip: O () Delete GOLDWIRE, TERRY A Title: Title: () Change () Addition Name: Name: 2224 NANTES CT. Address: Address: City-St-Zip: ORLANDO, FL 32808 City-St-Zip: Title: () Delete Title: () Change () Addition COOPER, BONITA Name: Name: 4108 DELRAY STREET Address: Address: City-St-Zip: ORLANDO, FL 32839 City-St-Zip:

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: HURGENE VINSON DP 03/25/2007