2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 855151

Apr 02, 2009
Secretary of State

Entity Name: HOLINESS TEMPLE, INC.

Current Principal Place of Business: New Principal Place of Business: 8514 SKYBAR LAKE COVE BOYNTON BEACH, FL 33473 US **Current Mailing Address: New Mailing Address:** P.O. BOX 740364 BOYNTON BEACH, FL 33474 FEI Number: 22-2581529 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: BROWN-HAYNES, LYDIAH-YANA I 8181 WEST BROWARD BLVD. #300 PLANTATION, FL 33324 US 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 BROWN, ELAINE A., Name: Name: 8514 SKYBAR LAKE COVE Address: Address: City-St-Zip: BOYNTON BEACH, FL 33473 City-St-Zip: Title: () Delete Title: () Change () Addition Name: BROWN, DAVID W. Name: Address: 8445 BREEZY HILL TERRACE Address: City-St-Zip: BOYNTON BEACH, FL 33473 City-St-Zip: Title: () Delete Title: () Change () Addition JACKSON, RUTH C. Name: Name: 11030 MISTY RIDGE WAY Address: Address: City-St-Zip: BOYNTON BEACH, FL 33473 City-St-Zip: Title: () Delete Title: () Change () Addition Name: INMAN, VERNELL, Name: Address: 7000 NW 17TH AVENUE Address: City-St-Zip: PLANTATION, FL 33313 City-St-Zip: Title: () Delete Title: (X) Change () Addition JACKSON, ANTHONY H BROWN, RUDOLPH W JR. Name: Name: 2331 N. S.R.7 #216 12709 89 PLACE N. Address: Address: City-St-Zip: LAUDERHILL, FL 33313 City-St-Zip: WEST PALM BEACH, FL 33412 Title: () Delete Title: () Change () Addition HAYNES, KAREN Name: Name: Address: 736 NW 91ST TERRACE Address: PLANTATION, FL 33324 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: VERNELL INMAN S 04/02/2009