

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000001177

FILED  
Jan 06, 2005  
Secretary of State

**Entity Name:** THE HOLY METHODIST COMMUNITY FELLOWSHIP CHURCH, INC.

**Current Principal Place of Business:**

809 HASTIN PLACE  
KISSIMMEE, FL 347583163

**New Principal Place of Business:**

**Current Mailing Address:**

809 HASTIN PLACE  
KISSIMMEE, FL 347583163

**New Mailing Address:**

**FEI Number:** 90-0129162

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HUSTON, WILLIE  
809 HASTIN PLACE  
KISSIMMEE, FL 347583163 US

**Name and Address of New Registered Agent:**

HUSTON, WILLIE H  
809 HASTIN PLACE  
KISSIMMEE, FL 347583163 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: WILLIE H. HUSTON

01/06/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CPS ( ) Delete  
Name: CURTIS, THOMAS L  
Address: 950 CAMBRIDGE COURT  
City-St-Zip: KISSIMMEE, FL 347582944

Title: VCPV ( ) Delete  
Name: KING, KENNY B  
Address: 1030 SHAWNEE DRIVE  
City-St-Zip: KISSIMMEE, FL 34744

Title: DT ( ) Delete  
Name: HUSTON, WILLIE  
Address: 809 HASTIN PLACE  
City-St-Zip: KISSIMMEE, FL 347583163

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DT (X) Change ( ) Addition  
Name: HUSTON, WILLIE H  
Address: 809 HASTIN PLACE  
City-St-Zip: KISSIMMEE, FL 347583163

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WILLIE H. HUSTON

DT

01/06/2005

Electronic Signature of Signing Officer or Director

Date