2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000002874

FILED Jan 10, 2011 Secretary of State

Entity Name: MY FATHERS HOUSE LIMITED, INC.

Current Principal Place of Business: New Principal Place of Business:

2628 DEL PRADO BLVD. S. CAPE CORAL, FL 33904

Current Mailing Address: New Mailing Address:

2628 DEL PRADO BLVD. S. PO BOX 152226 CAPE CORAL, FL 33904 CAPE CORAL, FL 33915

FEI Number: 27-2949781 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:

SSEKIRANDA, REMIGIOUS REV.FR. 2628 DEL PRADO BLVD. S. CAPE CORAL, FL 33904 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:

Title: C

Name: SSEKIRANDA, REMIGIOUS REV.FR.

Address: 2628 DEL PRADO BLVD. S. City-St-Zip: CAPE CORAL, FL 33904

Title: VC

Name: DOMINGUEZ, VIRGEN E

Address: 2127 SW 4 CT

City-St-Zip: CAPE CORAL, FL 33991

Title:

Name: TORRES, LOURDES Y Address: 2127 SW 4 CT

City-St-Zip: CAPE CORAL, FL 33991

Title: F

Name: SEMUJU, CHARLES
Address: PO BOX 8075
City-St-Zip: KAMPALA, XX

Title: VF

Name: SEKAMANJE, DEOGRACIA

Address: PO BOX 8075 City-St-Zip: KAMPALA, XX

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: FR REMIGIOUS SSEKIRANDA REV 01/10/2011