

F 12000001143

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

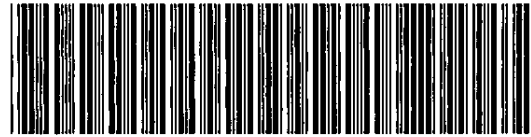
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3/15/12

## COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: House of David Ministries Inc  
Name of Corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Good Standing" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Tony Owens  
Name of Person

House of David Ministries Inc  
Firm/Company

811 E. Semoran Blvd  
Address

Apopka, FL 32703  
City/State and Zip Code

Tonyseniorette@aol.com  
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Tony Owens at 347) 866-3386  
Name of Person Area Code & Daytime Telephone Number

**MAILING ADDRESS:**  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 27, 2012

TONY OWENS  
811 E. SEMORAN BLVD.  
APOPKA, FL 32703

SUBJECT: HOUSE OF DAVID MINISTRIES INC.  
Ref. Number: W12000011119

We have received your document for HOUSE OF DAVID MINISTRIES INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The registered agent must sign accepting the designation.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 012A00007968

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**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA**

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. House of David Ministries Inc.  
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. New York 3. 11-3410954  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. December 17, 2001 5. "Perpetual"  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 811 E. Semoran Blvd, Apopka, FL 32703  
(Principal office address)
- 145-86 183 street, Springfield Gardens, NY 11413  
(Current mailing address)

8. A Christian Ministry / Church, Teach the Bible  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: Tony Owens

Office Address: 811 E. Semoran Blvd  
Apopka (City), Florida 32703 (Zip Code)

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**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Tony Owens  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

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A. DIRECTORS

Chairman: Tony Owens  
Address: 145-86 183 st  
Springfield Gardens, NY 11413  
Vice Chairman: Sceniorette Owens  
Address: 145-86 183 street  
Springfield Gardens, NY 11413  
Director: CLARA Owens  
Address: 2225 Parkhurst Rd  
Elmont, NY 11003  
Director: \_\_\_\_\_  
Address: \_\_\_\_\_

B. OFFICERS

President: Tony Owens  
Address: 145-86 183-street  
Springfield Gardens, NY 11413  
Vice President: Sceniorette Owens  
Address: 145-86 183 street  
Springfield Gardens, NY 11413  
Secretary: CLARA Owens  
Address: 2225 Parkhurst Rd, Elmont, NY 11003  
Treasurer: Tony Owens  
Address: 145-86 183 street, Springfield Gardens, NY 11413

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Tony Owens  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)  
14. Tony Owens President, Chairman  
(Typed or printed name and capacity of person signing application)

**State of New York**  
**Department of State** } ss:

I hereby certify, that the Certificate of Incorporation of HOUSE OF DAVID MINISTRIES INC. was filed on 11/13/1997, under the name of FAITH BUILDERS MINISTRIES INC., as a Not-for-Profit Corporation and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment FAITH BUILDERS MINISTRIES INC., changing its name to HOUSE OF DAVID MINISTRIES INC., was filed 12/24/2001.



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*WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 05th day of March two  
thousand and twelve.*

*First Deputy Secretary of State*