

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 23, 2008 8:00 am
Secretary of State

05-23-2008 90019 046 ****70.00

DOCUMENT # N01000002905 1. Entity Name HIGHWAY OF HOLINESS CHURCH, INC.			
Principal Place of Business 1560 QUAIL DRIVE WEST PALM BEACH, FL 33409		Mailing Address 5068 CAMPANELLI CIR. W. PALM BCH, FL 33417	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 710 Highland Dr.	
Suite, Apt. #, etc. SAME AS ABOVE		Suite, Apt. #, etc.	
City & State West Palm Bch Fla		4. FEI Number 65-1097657	
Zip 33405		Country FL	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		Applied For Not Applicable	
6. Name and Address of Current Registered Agent JOSEPH, SHIRLEY 5068 CAMPANELLI CIR. W. PALM BCH, FL 33417		7. Name and Address of New Registered Agent Name: William STROTHER Street Address (P.O. Box Number is Not Acceptable): 710 HIGHLAND Drive City: West Palm Beach FL Zip Code: 33404	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u>William Strother</u> DATE: <u>4/28/08</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DR JOSEPH, SHIRLEY 5068 CAMPANELLI CIR. W. PALM BCH, FL 33417	TITLE NAME STREET ADDRESS CITY-ST-ZIP	William Strother 710 Highland Drive West Palm Beach FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NEWTON, CHARLES 6761 SILVER RIDGE LANE G.A., FL 33462	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KUBLALSINGH, STEVE 423 SE STREET LAKE WORTH, FL 33460	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STROTHERS, BILL 710 HIGHLAND DRIVE WEST PALM BEACH, FL 33404	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete <input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Shirley Joseph</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		4/28/08 (561) 686-4766 <small>Date Daytime Phone #</small>	