## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000003180

FILED Jul 21, 2006 Secretary of State

Entity Name: LIBERTY TEMPLE CHURCH OF TRUTH MINISTRIES, INC.

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

5069 CLEVELAND RD. JACKSONVILLE, FL 32209

Current Mailing Address: New Mailing Address:

5069 CLEVELAND RD. JACKSONVILLE, FL 32209

FEI Number: 04-3692500 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

HUGHES, WILLIE J
7352 OLD KINGS RD SOUTH
6450 KINLOCK DRIVE

JACKSONVILLE, FL 32217 US JACKSONVILLE, FL 32219 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: 07/21/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: HUGHES, WILLIE J Name: HUGHES, WILLIE J

Address: 7352 OLD RIDGE RD SOUTH Address: 6450 KINLOCK DRIVE
City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: JACKSONVILLE, FL 32219

Title: VPD ( ) Delete Title: VPD (X) Change ( ) Addition Name: HUGHES, CHRISTINE E Name: HUGHES, CHRISTINE E

Address: 7352 OLD KINGS RD SOUTH Address: 6450 KINLOCK DRIVE
City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: JACKSONVILLE, FL 32219

Title: () Delete Title: (X) Change ( ) Addition JACKSON, DARLENE JACKSON-SHEFFIELD, DARLENE Name: Name: 1000 BERT RD APT N 225 7061 OLD KINGS ROAD SOUTH APT. 132 Address: Address: City-St-Zip: JACKSONVILLE, FL 32211 City-St-Zip: JACKSONVILLE, FL 32217

Title: SD (X) Delete Title: ( ) Change ( ) Addition

 Name:
 JACKSON, DARLENE
 Name:

 Address:
 7528 ARLINGTON EXP. APT 707
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32211
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CHRISTINE E. HUGHES VPD 07/21/2006