

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Sep 14, 2004 8:00 am**  
**Secretary of State**

09-14-2004 90002 013 \*\*\*\*70.00

<b>DOCUMENT # N01000004867</b>			
<b>1. Entity Name</b> TEMPLE OF HAPPINESS CHURCH OF GOD INC.			
<b>Principal Place of Business</b> 9755 NW 193RD STREET MICANOPY, FL 32667		<b>Mailing Address</b> 18255 N.W. 60TH AVENUE REDDICK, FL 32686	
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip		Zip	
Country		Country	
<b>4. FEI Number</b> 27-0005117		Applied For <input type="checkbox"/> Not Applicable	
<b>5. Certificate of Status Desired</b>		<input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>		<b>7. Name and Address of New Registered Agent</b>	
PATTERSON, BARBARA H PASTOR 18255 N.W. 60TH AVENUE REDDICK, FL 32686		Name Street Address (P.O. Box Number is Not Acceptable) City	
FL		Zip Code	
<b>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.</b>			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)			
Signature, typed or printed name of registered agent and title if applicable.			
<b>Filing Fee is \$61.25</b> <b>Due by September 8, 2004</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>	
<b>\$5.00 May Be Added to Fees</b>		<b>Make check payable to Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
<b>TITLE</b> VD <b>NAME</b> HONOR, CASEY <b>STREET ADDRESS</b> 18255 N.W. 60TH AVENUE <b>CITY-ST-ZIP</b> REDDICK, FL 32686	<input type="checkbox"/> Delete	<b>TITLE</b> NAME <b>STREET ADDRESS</b> CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> SD <b>NAME</b> KING, CHERRELLE <b>STREET ADDRESS</b> 18255 N.W. 60TH AVENUE <b>CITY-ST-ZIP</b> REDDICK, FL 32686	<input type="checkbox"/> Delete	<b>TITLE</b> NAME <b>STREET ADDRESS</b> CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> D <b>NAME</b> THOMAS, MARIO <b>STREET ADDRESS</b> 18265 N.W. 60TH AVENUE <b>CITY-ST-ZIP</b> REDDICK, FL 32686	<input type="checkbox"/> Delete	<b>TITLE</b> NAME <b>STREET ADDRESS</b> CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> D <b>NAME</b> PATTERSON, RAYMOND <b>STREET ADDRESS</b> 18255 N.W. 60TH AVENUE <b>CITY-ST-ZIP</b> REDDICK, FL 32686	<input type="checkbox"/> Delete	<b>TITLE</b> NAME <b>STREET ADDRESS</b> CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> DD <b>NAME</b> MILLER, EDWARD <b>STREET ADDRESS</b> 18265 NW 60TH AVE. <b>CITY-ST-ZIP</b> REDDICK, FL 32686	<input checked="" type="checkbox"/> Delete	<b>TITLE</b> NAME <b>STREET ADDRESS</b> CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME <b>STREET ADDRESS</b> CITY-ST-ZIP	<input type="checkbox"/> Delete	<b>TITLE</b> NAME <b>STREET ADDRESS</b> CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>12. I hereby certify that the information supplied with this filing does not qualify 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 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.</b>			
<b>SIGNATURE:</b> <i>Barbara Patterson</i>		9-8-04 (35)591-1055	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	