2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

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FILED
Jun 03, 2004 8:00 am
Secretary of State

05-03-2004 90695 035 ****70.00

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MOORE CR2E037 (11/03)

DOCUMENT # N01000007567

1. Entity Name

JESUS CHRIST HOUSE OF PRAYER OF HOLINESS INC.

Principal Place of Business	Mailing Address
5721 ELON DR ORLANDO FL 32808	5721 ELON DR ORLANDO FL 32808

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3744527 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
OWENS, JAMES 1912 ATTUCKS AVE ORLANDO FL 32811	Name: James A. Owens Street Address (P.O. Box Number is Not Acceptable): 429 N. Paramore City: Orlando FL Zip Code: 32808

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 X _____ 5/27/04

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25 Due By May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P OWENS, JAMES A 5721 ELON DR ORLANDO FL 32808 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Usher) Shantana Johnson 5206 N. Orange Blossom Trail Apt 202 ☐ Change ☑ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP OWENS, ROSA 3843 SEABROOK AVE ORLANDO FL 32811 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Mashawna Clark (Usher) 3750 Trouati, St. Orlando FL. 32839 ☐ Change ☑ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	B OWENS, SHANTARA 5721 ELON DR ORLANDO FL 32808 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Usher Mashawna Clark 3750 Trouati St. ← Address is Here Orlando FL 32839 ☐ Change ☑ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	E MONFORD, MATTIE 47 ARGO ST ORLANDO FL 32805 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Usher Shantana Johnson 5206 N. Orange Blossom Trail. Orlando, FL 32810 ← Address is Here ☐ Change ☑ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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.

SIGNATURE X James A Owens President — 4/18/04 — 407 925-9895

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #