2006 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N02000000363

1. Entity Name



FILED

Apr 27, 2006 8:00 am Secretary of State

04-27-2006 90215 029 ****61.25

FIRST HOLINESS CHURCH OF THE LIVING GOD, INC. NO.3												
Principal Place of Business 505 ROYAL PALM BEACH BLVD ROYAL PALM BEACH, FL 33411 P.O. BOX 210425 WEST PALM BEACH, FL 33421								##11 0 (104) ## 10 ## 10 #		114 141 1 412 H	ALL 21 ITU	
Principal Place of Business 3. Mailing Address												
Suite, Apt. #, etc.			Suite, Apt. #, etc.					04212006	Chg-NP	CR2E0	37 (11/05)	
City & State			City & State					4. FEI Numbe 04-360	1441		<u> </u>	oplied For ot Applicable
Zip	Country Z			Zip Country				5. Certificate	of Status Desired		\$8.75 Add Fee Require	
Name and Address of Current Registered Agent								7. Name and	Address of New	Registered	Agent	
ROBINSO	N AUBIN	w				Name						
ROBINSON, AUBIN W 505 ROYAL PALM BEACH BLVD ROYAL PALM BEACH, FL 33411						Street Address (P.O. Box Number is Not Acceptable)						
						City				FL	Zip Cod	e
	named entit	ty submits this statement for tered agent.	r the purpo	se of changing its r	egister	ed office or	register	ed agent, or bot	h, in the State of I	Florida. I am	familiar with,	and accept
SIGNATURE												
	Signature, typed	or printed name of registered agent a	and title if applic	able. (NOTE:	Registere	d Agent signatur	re required	when reinstating)		DATE		
	Filling Fe	pe is \$61.25 May 1, 2006	and title if applic	9. Election Cam Trust Fund Co	paign F	inancing	re required	\$5.00 May B Added to Fees	e Fi	Make chec	k payable t	
10.	Filling Fe	e ls \$61.25		9. Election Cam	paign F	inancing	0	\$5.00 May B Added to Fees	e FI	Make chec orida Depar	rtment of St	tate
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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 attactment with an address, with all other like empowered.

SIGNATURE: