2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Jun 21, 2006 8:00 am
Secretary of State
04-27-2006 90150 048 ****75.00

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1. Entity Name
HOUSE OF GOD BY FAITH PENTACOSTAL CHURCH INC

66020216

Principal Place of Business	Mailing Address
1941 SUNSET PLACE FT MYERS, FL 33901	1941 SUNSET PLACE FT MYERS, FL 33901

04152006 Chg-NP CR2E037 (11/05)

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 03-0423014 ☐ 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
ANTOINE, ERNST 1941 SUNSET PLACE FT MYERS, FL 33901	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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

Filing Fee is $61.25 Due by May 1, 2006

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	D ANTOINE, ERNST 2205 SOUTH STREET FT MYERS, FL 33901	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Youth Pastor Christi Remy 214 Fire side Cote Lehigh Florida 33936	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ANTOINE, MARIE J 2205 SOUTH STREET FT MYERS, FL 33901	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Missionary Joan Wilner Antoine 1706 NE 17 Terr Cape Coral FL 33909	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AT SIMON, JOREL 2030 GROVE AVE FORT MYERS, FL 33901	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Edely Ferdinand 2428 Evans Ave Fort Myers FL 33901 Pastor	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BENAVENTE, BAUDILIO 1706 NE CAPE CORAL GARCIA CAPE CORAL, FL 33909	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	JP BENAVENTE, BAUDILIO 1706 NE CAPE CORAL CAPE CORAL, FL 33909	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VEDRINE, CHRISTINE 2033 MARA VILLA CIRLCE FORT MYERS, FL 33901	☐ 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 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: _____ Date _____ Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR