2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000002084

Entity Name: THE HOUSE OF GOD - PENASCOLA BAND INC.

FILED Apr 30, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 511 E GADSDEN ST PENSACOLA, FL 32501 **Current Mailing Address: New Mailing Address:** 10373 MCARTHUR LN PENSACOLA, FL 32534 FEI Number: 04-3636062 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CRENSHAW, SABRINA 10373 MCARTHUR LN US PENSACOLA, FL 32534 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change (X) Addition CRENSHAW, SABRINA Name: Name: Address: Address: 10373 MCARTHUR LANE City-St-Zip: City-St-Zip: PENSACOLA, FL 32534 () Change (X) Addition Title: Title: () Delete SMITH, RUFUS III Name: Name: Address: Address: 517 PINE BROOK CIRCLE City-St-Zip: City-St-Zip: CANTONMENT, FL 32533 Title: () Delete Title: SEC () Change (X) Addition ROPER, LARRY Name: Name: 5042 SKYLARK CT. Address: Address: City-St-Zip: City-St-Zip: PENSACOLA, FL 32505 Title: () Delete Title: **PRES** () Change (X) Addition Name: Name: SMITH, CLARENCE 3411 W. JORDAN ST. Address: Address: City-St-Zip: City-St-Zip: PENSACOLA, FL 32505 Title: () Delete Title: () Change (X) Addition SMITH, RUFUS JR. Name: Name: 49 CLARINDA LANE Address: Address: City-St-Zip: City-St-Zip: PENSACOLA, FL 32503 Title: () Delete Title: () Change (X) Addition CRENSHAW, MICHAEL Name: Name: Address: Address: 2830 VALKYRY WAY CANTONMENT, FL 32533 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CLARENCE SMITH PRES 04/30/2003