

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 10, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # N02000003927

1. Entity Name

HOLINESS HOUSE CHURCH OF GOD, INC.



Principal Place of Business

Mailing Address

707 TRENTON RD.  
LAKELAND FL 33815

707 TRENTON RD.  
LAKELAND FL 33815



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

61-1413579

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

CHAPMAN, BISHOP THOMAS  
707 TRENTON ROAD  
LAKELAND FL 33815

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

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, 2007**

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

TITLE PD ☐ Delete  
NAME JOHNSON, MARTY  
STREET ADDRESS 1035 ARLINGTON AVE. N., SUITE 1101  
CITY-ST-ZIP LAKELAND FL 33815

TITLE DT ☐ Delete  
NAME BARLOW, NANCY  
STREET ADDRESS 707 TRENTON RD.  
CITY-ST-ZIP LAKELAND FL 33815

TITLE SD ☐ Delete  
NAME JOHNSON, WANDA  
STREET ADDRESS 1035 ARLINGTON AVE. N., SUITE 1101  
CITY-ST-ZIP LAKELAND FL 33815

TITLE VD ☐ Delete  
NAME CHAPMAN, THOMAS  
STREET ADDRESS 707 TRENTON RD.  
CITY-ST-ZIP LAKELAND FL 33815

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 000000696904  
CITY-ST-ZIP 04/18/07-80017-026 70.00

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

*Pastor Thomas L. Chapman*

4-4-2007