

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004576

FILED  
Jan 23, 2006  
Secretary of State

Entity Name: THE HOLY PLACE, INC.

## Current Principal Place of Business:

1591 SE PPORT ST LUCIE BLVD  
STE D  
PORT SAINT LUCIE, FL 34952

## Current Mailing Address:

1591 SE PPORT ST LUCIE BLVD  
STE D  
PORT SAINT LUCIE, FL 34952

## New Principal Place of Business:

1591 SE PORT ST LUCIE BLVD  
STE D  
PORT ST LUCIE, FL 34952

## New Mailing Address:

1591 SE PORT ST LUCIE BLVD  
STE D  
PORT ST LUCIE, FL 34952

FEI Number: 04-3689481

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BELL, DWIGHT W  
361 SW MAJESTIC TERR  
PORT ST LUCIE, FL 34984 US

## Name and Address of New Registered Agent:

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:

Title: P ( ) Delete  
Name: DUFFIELD, RICKY  
Address: 2334 SW FERN CIR  
City-St-Zip: PORT ST LUCIE, FL 34953

Title: VD ( ) Delete  
Name: RIVERA, HERIBERTO  
Address: 2552 SW KENSINGTON STREET  
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: ST ( ) Delete  
Name: BELL, DWIGHT W  
Address: 361 SW MAJESTIC TERR  
City-St-Zip: PORT ST LUCIE, FL 34984

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: DWIGHT W BELL

ST

01/23/2006

Electronic Signature of Signing Officer or Director

Date