2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000004855

Entity Name: HOUSE OF GOD ACADEMY AND LEARNING CENTER, INC.

FILED Mar 17, 2003 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
2851 N. E STREET PENSACOLA, FL 32503				2851 N. E STREET PENSACOLA, FL 32501		
Current Mailing Address:			New Maili	New Mailing Address:		
511 E GADSDEN ST PENSACOLA, FL 32501				2851 N. "E" STREET PENSACOLA, FL 32501		
FEI Number: 3	30-0122359	FEI Number Applied For()	FEI Number Not App	plicable () Certificate of Status Desired (>	()	
Name and Address of Current Registered Agent: Name				d Address of New Registered Agent:		
ROPER, LARRY 5042 SKYLARK CT PENSACOLA, FL 32505 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,						
in the State						
SIGNATURI		ic Signature of Registered Agent		Date		
			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () ROPER, LARR' 5042 SKYLARK PENSACOLA, F	CCT	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	V () SMITH, RUFUS PO BOX 59 MOLINO, FL 33		Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	S () CRENSHAW, M 2830 VALKYRY PENSACOLA, F	'WAY	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	T () SMITH, RUFUS 49 CLARINDA I PENSACOLA, F	_N	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	DIR () Change (X) Addition ROPER, LARRY D DIR 5042 SKYLARK COURT PENSACOLA,, FL 32505		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	DIR () Change (X) Addition SMITH, RUFUS J DIR 49 CLARINDA LANE PENSACOLA, FL 32505		

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: LARRY D. ROPER PRES 03/17/2003