2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010720

City-St-Zip:

FILED Mar 29, 2008 Secretary of State

Entity Nar	me: HOLY SPI	RIT CHURCH, INC.				
Current Principal Place of Business:			New Principal Place of Business:			
2764 CAPI TALLAHAS	TAL CIRCLE, N SSEE, FL 3230	NE 8				
Current Mailing Address:			New Maili	New Mailing Address:		
	TAL CIRCLE, N SSEE, FL 3230					
FEI Number: 01-0805487 FEI Number Applied For ()		FEI Number Not Appl	icable () Certificate of Status Desired (X)			
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
2764 CAPI	N, JAMES B JR TAL CIRCLE, N SSEE, FL 3230	1E				
	named entity s e of Florida.	ubmits this statement for the p	urpose of changing i	ts registered office or registered agent, or both,		
SIGNATUR	RE:					
Electronic Signature of Registered Agent			ent	Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PRES () HAMPTON, JAM 7305 WINTERC TALLAHASSEE,	REEK LANE	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	VP () BABCOCK, LYM 1500 LOCHINVA TALLAHASSEE,	R LANE	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition STINSON, STEVE 5494 CHARLES SAMUEL DRIVE TALLAHASSEE, FL 32309		
Title: Name: Address: City-St-Zip:	STINSON, STEV	SAMUEL DRIVE	Title: Name: Address: City-St-Zip:	SEC (X) Change () Addition ACKERMAN, CINDI 2729 OAKLEIGH CT TALLAHASSEE, FL 32312		
Title: Name: Address:	()	Delete	Title: Name: Address:	TREA () Change (X) Addition CHERRY, TERRI 3219 THOMASVILLE RD # 18-C		

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

TALLAHASSEE, FL 32308 79

SIGNATURE: JAMES B HAMPTON JR PRES 03/29/2008