2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03034

FILED Jan 06, 2006 Secretary of State

Entity Name: FULL GOSPEL HOLINESS CHURCH, INC.

US

Current Principal Place of Business: New Principal Place of Business:

14471 SE 5TH PLACE WILLISTON, FL 32696 US

Current Mailing Address: New Mailing Address:

14471 SE 5TH PLACE WILLISTON, FL 32696

FEI Number: 59-2556618 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HOUSH, LESTER W REV. 14471 SE 5TH PLACE WILLISTON, FL 32696 US

OFFICERS AND DIRECTORS:

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

Electronic elginatare el regiotei

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: HOUSH, LESTER HOUSH, LESTER

 Name
 Notice
 Notice
 Hoosh, LESTER

 Address:
 9701 NW 25TH ST.
 Address:
 14471 SE 5TH PLACE

 City-St-Zip:
 SUNRISE, FL
 City-St-Zip:
 WILLISTON, FL 32696

Title: TD () Delete Title: D (X) Change () Addition Name: HOUSH, DREMA Name: HOUSH, DREMA

 Name:
 HOUSH, DREWA
 Name:
 HOUSH, DREWA

 Address:
 9701 NW 25TH ST.
 Address:
 14471 SE 5TH PLACE

 City-St-Zip:
 SUNRISE, FL
 City-St-Zip:
 WILLISTON, FL 32696

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 RAMOS, ROLANDO
 Name:
 RAMOS, ROLANDO

 Address:
 6760 NW 29TH CT.
 Address:
 12151 NE 10TH ST

 City-St-Zip:
 SUNRISE, FL
 City-St-Zip:
 WILLISTON, FL 32696

 $\label{eq:title:ST} {\sf Title:ST} \qquad \qquad {\sf ST} \qquad {\sf (X) Change (\) Addition}$

 Name:
 RAMOS, RHONDA
 Name:
 RAMOS, RHONDA

 Address:
 6760 NW 29TH CT.
 Address:
 12151 NE 10TH ST

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 City-St-Zip:
 WILLISTON, FL 32696

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: LESTER HOUSH PD 01/06/2006