

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005583

FILED
Feb 18, 2009
Secretary of State

Entity Name: GOD'S HOLY TEMPLE CHRISTIAN WORSHIP CENTER, INC.

Current Principal Place of Business:

C/O WINSTON REYNOLDS, PRES. & TREAS.
4181 S.W. ALICE ST.
PORT ST. LUCIE, FL 349530000

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 880636
PORT ST. LUCIE, FL 34988

New Mailing Address:

FEI Number: 30-0245393

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SOUTHWEST 22 STREET, 4TH FLOOR
MIAMI, FL 33145 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: PDTC () Delete
Name: REYNOLDS, WINSTON L
Address: 4181 S.W. ALICE ST
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: VPDS () Delete
Name: REYNOLDS, SHIRLEY A
Address: 4181 S.W. ALICE ST
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: T () Delete
Name: REYNOLDS, WINSTON L
Address: 4181 SW ALICE ST
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: VPD () Delete
Name: POWELL, CARTER L
Address: 342 SW 34TH TERR.
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: VP () Delete
Name: LINDO-POWELL, ENA F
Address: 342 SW 34TH TERR
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: () Delete
Name:
Address:
City-St-Zip:

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:

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

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

Title: D () Change (X) Addition
Name: JACKSON, ELIZABETH F
Address: 6485 53RD CIRCLE
City-St-Zip: VERO BEACH, FL 32967

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.

SIGNATURE: ELIZABETH F. JACKSON

D

02/18/2009

Electronic Signature of Signing Officer or Director

Date