2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2008
Secretary of State

DOCUMENT# N04000009253

Entity Name: POTTERS HOUSE WORSHIP MINISTRIES, INC.

Current Principal Place of Business:

9600 WEST COLONIAL DRIVE
OCOEE, FL 34761 US

New Principal Place of Business:

Current Mailing Address:

857 GOLF LAND DRIVE
APOPKA, FL 32712 US

New Mailing Address:

857 GULF LAND DRIVE
APOPKA, FL 32712 US

FEI Number: 55-0871685 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

REID, EDWARD B PASTOR
857 GULF LAND DRIVE
APOPKA, FL 32712 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: DP ( ) Delete
Name: REID, EDWARD B PASTOR
Address: 857 GULF LAND DRIVE
City-St-Zip: APOPKA, FL 32712

Title: DP ( ) Delete
Name: REID, JOSEPHINE W PASTOR
Address: 857 GULF LAND DRIVE
City-St-Zip: APOPKA, FL 32712

Title: D ( ) Delete
Name: REID, TASHIA D DR.
Address: 5229 VINELAND ROAD
City-St-Zip: ORLANDO, FL 32811

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 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: DR. TASHIA D. REID D 04/22/2008

Electronic Signature of Signing Officer or Director Date