

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006570

FILED
Apr 21, 2009
Secretary of State

Entity Name: HOLDING-ON HOUSE OF PRAYER HOLINESS CHURCH, CORP

Current Principal Place of Business:

1204 SPRUCE STREET
GREEN COVE SPRINGS, FL 32043

New Principal Place of Business:

Current Mailing Address:

1204 SPRUCE STREET
GREEN COVE SPRINGS, FL 32043

New Mailing Address:

FEI Number: 05-0618762

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOODMAN, KAWANA
1313 LOVE DRIVE
GREEN COVE SPRINGS, FL 32043 US

Name and Address of New Registered Agent:

GOODMAN, KAWANA
1026 GRANVILLE ROAD
JACKSONVILLE, FL 32205 US

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:

04/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GOODMAN, JEROME
Address: 603 WASHINGTON LANE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: D () Delete
Name: GOODMAN, KAWANA
Address: 729 MACKINAW ST PRK
City-St-Zip: JACKSONVILLE, FL 32254

Title: FP () Delete
Name: GOODMAN, FRANKIE
Address: 1204 SPRUCE STREET
City-St-Zip: GREEN COVE SPRINGS, FL 32043

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: GOODMAN, KAWANA
Address: 1026 GRANVILLE ROAD
City-St-Zip: JACKSONVILLE, FL 32205 US

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: KAWANA GOODMAN

OFFI

04/21/2009

Electronic Signature of Signing Officer or Director

Date