2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010307

FILED May 09, 2008 Secretary of State

Entity Name: GOD'S HOUSE - A CHRISTIAN FELLOWSHIP, INC.

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

NICEVILLE HIGH SCHOOL JOHN SIMS PKWY DESTIN, FL 32578

Current Mailing Address: New Mailing Address:

GOD'S HOUSE PO BOX 775 NICEVILLE, FL 32588

FEI Number: 27-0145431 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

GILLILAND, STEVEN
407 SOUTH SHORE DR.
DESTIN, FL 32550 US
GILLILAND, STEVEN
282 WAVA AVE
NICEVILLE, FL 32578 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: 05/09/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition
lame: GILLILAND. STEVEN Name: GILLILAND. STEVEN

 Name:
 GILLILAND, STEVEN
 Name:
 GILLILAND, STEVEN

 Address:
 407 SOUTH SHORE DR
 Address:
 282 WAVA AVE

 City-St-Zip:
 DESTIN, FL 32550
 City-St-Zip:
 NICEVILLE, FL 32578

Title: STD () Delete Title: STD (X) Change () Addition Name: GILLILAND, ADRIENNE H

Name:GILLILAND, ADRIENNE HName:GILLILAND, ADRIENNE HAddress:407 SOUTH SHORE DRAddress:282 WAVA AVECity-St-Zip:DESTIN, FL 32550City-St-Zip:NICEVILLE, FL 32578

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: ADRIENNE H. GILLILAND MRS. 05/09/2008