

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05212

FILED
May 29, 2009
Secretary of State

Entity Name: THE OPEN DOOR HOLINESS CHURCH, ONE GOD, INC.

Current Principal Place of Business:

1408 WISCONSIN AVE
LYNN HAVEN, FL 32444

New Principal Place of Business:

Current Mailing Address:

1408 WISCONSIN AVE
LYNN HAVEN, FL 32444

New Mailing Address:

FEI Number: 03-0478358 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

MCINTYRE, CLINTON
1408 WISCONSIN AVE
LYNN HAVEN, FL 32444 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: APD () Delete
Name: MCINTYRE, CLINTON
Address: 1408 WISCONSIN AVE.
City-St-Zip: LYNN HAVEN, FL

Title: VDM () Delete
Name: MCINTYRE, LUREATHA
Address: 1408 WISCONSIN AVE
City-St-Zip: LYNN HAVEN, FL

Title: DS () Delete
Name: FLEMING, EDNA
Address: 1410 WISCONSIN AVE
City-St-Zip: LYNN HAVEN, FL

Title: CM () Delete
Name: BROWN, REGGIE
Address: 1505 11TH ST
City-St-Zip: PANAMA CITY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DS (X) Change () Addition
Name: GOODMAN, CRIST
Address: 1408 WISCONSIN AVE
City-St-Zip: PANAMA CITY, FL 32401

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: LUREATHA MCINTYRE

VDM

05/29/2009

Electronic Signature of Signing Officer or Director

Date