

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004951

FILED  
Mar 23, 2009  
Secretary of State

**Entity Name:** LABORING IN GOD'S HOUSE TOGETHER MINISTRY, INC.

**Current Principal Place of Business:**

2190 SHARP COURT #200  
FERN PARK, FL 32730

**New Principal Place of Business:**

5083 OLD US ROAD  
MARIANNA, FL 32446

**Current Mailing Address:**

POST OFFICE BOX 607441  
ORLANDO, FL 328607441

**New Mailing Address:**

POST OFFICE BOX 173  
MALONE, FL 32445

**FEI Number:** 20-8943824

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TOWNSEND, CELIA M MRS.  
86 CASTLE BREWER COURT  
SANFORD, FL 32771 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: D ( ) Delete  
Name: JOHNSON, ANGELA  
Address: 8556 WHITE ROSE DRIVE  
City-St-Zip: ORLANDO, FL 32818

Title: D ( ) Delete  
Name: BROOKS, SHIRLEY B  
Address: 107 WYMORE ROAD  
City-St-Zip: EATONVILLE, FL 32751

Title: D ( ) Delete  
Name: TOWNSEND, CELIA  
Address: 86 CASTLE BREWER COURT  
City-St-Zip: SANFORD, FL 32771

Title: D ( ) Delete  
Name: HOENIG, DAVID  
Address: 23 ANDREA DRIVE  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D ( ) Delete  
Name: FLUELLEN, DENISE  
Address: 742 W. CONCORD STREET  
City-St-Zip: ORLANDO, FL 32805

Title: D ( ) Delete  
Name: TOWNSEND, DAISY REV.  
Address: POST OFFICE BOX 607513  
City-St-Zip: ORLANDO, FL 32810

**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: D (X) Change ( ) Addition  
Name: JOHNSON, LORENZO  
Address: 5083 OLD US ROAD  
City-St-Zip: MARIANNA, FL 32446

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

Title: D (X) Change ( ) Addition  
Name: TOWNSEND, DAISY REV.  
Address: POST OFFICE BOX 173  
City-St-Zip: MALONE, FL 32445

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: REV. DAISY TOWNSEND

D

03/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date