2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003648

FILED Jul 09, 2008 Secretary of State

Entity Name: THE TRUE & LIVING GOD HOLINESS MINISTRY INC.

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

ORANGE PARK NORTH
4002 CONFEDERATE POINT ROAD
5291 COLLINS RD LOT #363
JACKSONVILLE, FL 32210

JACKSONVILLE, FL 32244

JACKSONVILLE, FL 32244

Current Mailing Address: New Mailing Address:

ORANGE PARK NORTH
5291 COLLINS RD LOT # 363
4002 CONFEDERATE POINT ROAD
JACKSONVILLE, FL 32210

FEI Number: 26-0174766 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:

WALKER, JOSHIE M
ORANGE PARK NORTH
5291 COLLINS RD LOT #363
JACKSONVILLE, FL 32244 US

WALKER, JOSHIE M
5342 SEABOARD AVE
APARTMENT 34
JACKSONVILLE, FL 32210 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: JOSHIE M WALKER 07/09/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: WALKER, JOSHIE M Name: WALKER, JOSHIE M
Address: ORANGE PARK NORTH 5291 COLLINS RD # 363 Address: 5342 SEABOARD AVE APARTMENT 34

City-St-Zip: JACKSONVILLE, FL 32244 City-St-Zip: JACKSONVILLE, FL 32210

Title: VP () Delete Title: VP (X) Change () Addition

Name: DOUGLAS, DOREY D Name: DOUGLAS, DOREY D

Address: ORANG PARK NORTH 5291 COLLINS RD #363 Address: 5342 SEABOARD AVE APARTMENT 34

City-St-Zip: JACKSONVILLE, FL 32244 City-St-Zip: JACKSONVILLE, FL 32210

Title: S () Delete Title: () Change () Addition

 Name:
 WILSON, MARIA
 Name:

 Address:
 ORANGE PARK NORTH 5291 COLLINS RD #130
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32244
 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: JOSHIE M WALKER P 07/09/2008