

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003555

FILED  
Apr 29, 2009  
Secretary of State

**Entity Name:** THE TRUE WORD OF LIFE HOLINESS CHURCH, INC.

**Current Principal Place of Business:**

12420 NW 23 AVE  
MIAMI, FL 33167

**New Principal Place of Business:**

**Current Mailing Address:**

12420 NW 23 AVE  
MIAMI, FL 33167

**New Mailing Address:**

**FEI Number:** 37-1564664

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNSON, JEROME  
12420 NW 23 AVE  
MIAMI, FL 33167 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: P ( ) Delete  
Name: JOHNSON, JEROME  
Address: 12420 NW 23 AVE  
City-St-Zip: MIAMI, FL 33167

Title: D ( ) Delete  
Name: JEFFERSON, JACK  
Address: 7425 N OAKMONT DRIVE  
City-St-Zip: MIAMI, FL 33015

Title: D ( ) Delete  
Name: WALTON, LUEYVONNE  
Address: 1735 NW 74 STREET  
City-St-Zip: MIAMI, FL 33147

Title: DS ( ) Delete  
Name: JOHNSON, TAMERA Y  
Address: 12420 NW 23 AVE  
City-St-Zip: MIAMI, FL 33167

**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: ( ) 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: JEROME JOHNSON

P

04/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date