

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000006818

FILED
Apr 01, 2011
Secretary of State

Entity Name: HOLY GHOST & FIRE CHRISTIAN EDUCATION CENTER, INC.

Current Principal Place of Business:

2110 N 45TH STREET
FT PIERCE, FL 34946

New Principal Place of Business:

Current Mailing Address:

PO BOX 3821
FT PIERCE, FL 34948

New Mailing Address:

FEI Number: 01-0941900

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRANKFIELD, J. CORNELIUS SR
2110 N 45TH STREET
FT PIERCE, FL 34946 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
Name: CRANKFIELD, JAY
Address: 2110 N 45TH STREET
City-St-Zip: FT PIERCE, FL 34946

Title: D
Name: BUSH, SABRINA
Address: 6897 BROOKHAVEN CIR
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: D
Name: CRANKFIELD, JOYCE E
Address: 2110 NORTH 45TH STREET
City-St-Zip: FT PIERCE, FL 34946

Title: D
Name: GLOVER, MILDRED
Address: 605 NW 4TH AVE #1
City-St-Zip: HALLANDALE, FL 33009

Title: D
Name: ALLEN, LORETHA
Address: 5434 SW 23 STREET
City-St-Zip: WEST PARK, FL 33023

Title: M
Name: MCINTYRE, LYNN
Address: 64 PEARL STREET
City-St-Zip: NEW HAVEN, CT 06511

I hereby 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 all other like empowered.

SIGNATURE: JOHN C. CRANKFIELD, SR.

P

04/01/2011

Electronic Signature of Signing Officer or Director

Date