

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000003895

FILED  
Aug 29, 2012  
Secretary of State

**Entity Name:** THE BLESSED HOUSE INTERNATIONAL CHURCH, INC.

**Current Principal Place of Business:**

362 LAKE DAWSON PL  
LAKE MARY, FL 32746

**New Principal Place of Business:**

**Current Mailing Address:**

362 LAKE DAWSON PL  
LAKE MARY, FL 32746

**New Mailing Address:**

FEI Number: 45-1586217

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PETERS, CHARLES D  
362 LAKE DAWSON PL  
LAKE MARY, FL 32746 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  
Name: PETERS, CHARLES D  
Address: 362 LAKE DAWSON PL  
City-St-Zip: LAKE MARY, FL 32746

Title: V P  
Name: KIKELOMO PETERS, ABIDEMI E  
Address: 362 LAKE DAWSON PL  
City-St-Zip: LAKE MARY, FL 32746

Title: D  
Name: OTEGBYE, DEJI  
Address: 511 SYLCVAN DR  
City-St-Zip: WINTER PARK, FL 32789

Title: D  
Name: ROMIMORA, FELIX  
Address: 6760 THOMAS JEFFERSON WAY  
City-St-Zip: ORLANDO, FL 32809

Title: D  
Name: ONI, JOHNSON  
Address: 7008 FOREST CITY RD  
City-St-Zip: ORLANDO, FL 30281

Title: D  
Name: ADEKANMI, ABIOLA  
Address: 3572 MOSS POINTE  
City-St-Zip: LAKE MARY, FL 32746

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: CHARLES D PETERS

P

08/29/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date